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Image# 14960722806

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

|  | For Other Than An Auth  | iorizea Committee  | (                  | Office Use Only  |
|--|---|--|--------------------|--|
| NAME OF     COMMITTEE (in full)  | TYPE OR PRINT ▼   | Example: If typing, type over the lines.   | 12FE4M5            |  |
| VOTEVETS   |   |  |                    |  |
|  |   |  |                    |  |
| ADDRESS (number and street)  | PO BOX 70980  |  |                    |  |
| Check if different than previously reported. (ACC)   | Washington  |  | DC                 | 20024  |
| 2. FEC IDENTIFICATION N  | UMBER ▼ CITY  | Y 🛦  | STATE ▲            | ZIP CODE ▲   |
| C C00418897  | 3. IS   | THIS EPORT X NEW (N) OR  | AMEI<br>(A)        | NDED   |
| 4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  X April 15 Quarterly Report (Continuous Properties of the Continuous Propert | Q1)  (c) 12-Day PRE-Election Report for the:  Q3)  (d) 30-Day POST-Election Report for the: | 20 (M2) May 20 (M5) 20 (M3) Jun 20 (M6) 20 (M4) Jul 20 (M7)  Primary (12P)  Convention (12C)  n on General (30G) |                    | (M9) Dec 20 (M12) (Non-Election Year Only)  (M10) Jan 31 (YE)  2G) Runoff (12R)  in the State of |
| (TER)  | Election  | n on   | Y                  | in the<br>State of   |
| 5. Covering Period 0   |   | through 03   | 31                 | 2014   |
| I certify that I have examined the   | his Report and to the best of   | my knowledge and belief it is t  | rue, correct and c | complete.  |
| Type or Print Name of Treasure   | er Rick Hegdahl   |  |                    |  |
| Signature of Treasurer Rick  | : Hegdahl   | [Electronically Filed]   | Date 04            | 15 / 2014  |
| NOTE: Submission of false, error   | neous, or incomplete information  | may subject the person signing   | this Report to the | penalties of 2 U.S.C. §437g.   |
| Office<br>Use  |   |  |                    | FEC FORM 3X<br>Rev. 12/2004  |

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **VOTEVETS** 2014 03 2014 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 95615.33 January 1, 2014 (b) Cash on Hand at 95615.33 Beginning of Reporting Period..... 19625.46 19625.46 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 115240.79 115240.79 6(a) and 6(c) for Column B)..... 28889.96 28889.96 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 86350.83 86350.83 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### **VOTEVETS**

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| . Contributions (other than loans) From:                               | 10101 11110 1 01100           | Caloniai Tour to Zato             |
| (a) Individuals/Persons Other  |                               |                                   |
| Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A)  | 1150.00                       | 1150.00                           |
| (ii) Heitanaina d  | 10075 46                      | 10975.46                          |
| (ii) Unitemized(iii) TOTAL (add  | 10975.46                      | 10973.40                          |
| Lines 11(a)(i) and (ii)▶   | 12125.46                      | 12125.46                          |
|  |                               |                                   |
| (b) Political Party Committees   | 0.00                          | 0.00                              |
| (c) Other Political Committees   | 7500.00                       | 7500.00                           |
| (such as PACs)   | 7 300.00                      | 7500.00                           |
| (d) Total Contributions (add Lines                                     |                               |                                   |
| 11(a)(iii), (b), and (c)) (Carry  Totals to Line 33, page 5)           | 19625.46                      | 19625.46                          |
| Transfers From Affiliated/Other  | 7                             | 7                                 |
| Party Committees   | 0.00                          | 0.00                              |
| ,                                | 7                             |                                   |
| . All Loans Received   | 0.00                          | 0.00                              |
|  |                               |                                   |
| . Loan Repayments Received   | 0.00                          | 0.00                              |
| . Offsets To Operating Expenditures                                    |                               |                                   |
| (Refunds, Rebates, etc.)   |                               |                                   |
| (Carry Totals to Line 37, page 5)                                      | 0.00                          | 0.00                              |
| . Refunds of Contributions Made  | ,                             | ,                                 |
| to Federal Candidates and Other  |                               | 0.00                              |
| Political Committees   | 0.00                          | 0.00                              |
| Other Federal Receipts   | 0.00                          | 0.00                              |
| (Dividends, Interest, etc.)  | 0.00                          | 0.00                              |
| (a) Non-Federal Account  |                               |                                   |
| (from Schedule H3)   | 0.00                          | 0.00                              |
| ,                                | 7                             |                                   |
| (b) Levin Funds (from Schedule H5)                                     | 0.00                          | 0.00                              |
| (2) 22/11 / 6/186 (1/6/11 20/1000/0 / 1/6)                             | 7                             |                                   |
| (c) Total Transfers (add 18(a) and 18(b))                              | 0.00                          | 0.00                              |
| . Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶ | 19625.46                      | 19625.46                          |
| . Total Federal Receipts (subtract Line 18(c) from Line 19)            | 19625.46                      | 19625.46                          |
| (Subtract Line 18(c) from Line 19)                                     | 19625.46                      | 19625.2                           |

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | Total This Period   |                       |  |
|--|---------------------|-----------------------|--|
| Operating Expenditures:  | rotal fillo I criod | Calendar Year-to-Date |  |
| (a) Allocated Federal/Non-Federal<br>Activity (from Schedule H4)   |                     |                       |  |
| (i) Federal Share  | 0.00                | 0.00                  |  |
|  |                     |                       |  |
| (ii) Non-Federal Share   | 0.00                | 0.00                  |  |
| (b) Other Federal Operating  | 44000.00            | 44000.00              |  |
| Expenditures   | 11389.96            | 11389.96              |  |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶ | 11389.96            | 11389.96              |  |
| Transfers to Affiliated/Other Party                                | 11003.30            | 11303.30              |  |
| Committees   | 0.00                | 0.00                  |  |
| Contributions to   |                     |                       |  |
| Federal Candidates/Committees and Other Political Committees       | 15000.00            | 15000.00              |  |
| Independent Expenditures   |                     |                       |  |
| (use Schedule E)   | 0.00                | 0.00                  |  |
| Coordinated Party Expenditures (2 U.S.C. §441a(d))                 |                     |                       |  |
| (2 U.S.C. §441a(d))<br>(use Schedule F)                            | 0.00                | 0.00                  |  |
|  | 0.00                | 0.00                  |  |
| Loan Repayments Made   | 0.00                | 0.00                  |  |
| Loans Made   | 0.00                | 0.00                  |  |
| Loans Made Refunds of Contributions To:                            | 0.00                | 0.00                  |  |
| (a) Individuals/Persons Other Than Political Committees            | 0.00                | 0.00                  |  |
| That I billiour committees   | 3.00                |                       |  |
| (b) Political Party Committees                                     | 0.00                | 0.00                  |  |
| (c) Other Political Committees                                     |                     |                       |  |
| (such as PACs)   | 0.00                | 0.00                  |  |
| (I) Talah Ozak ila Kan Bafa ak                                     |                     |                       |  |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))     | 0.00                | 0.00                  |  |
| (add Lines 20(a), (b), and (c))                                    | 7                   |                       |  |
| Other Disbursements  | 2500.00             | 2500.00               |  |
|  | 2000.00             |                       |  |
| Federal Election Activity (2 U.S.C. §431(20))                      |                     |                       |  |
| (a) Allocated Federal Election Activity                            |                     |                       |  |
| (from Schedule H6)   |                     |                       |  |
| (i) Federal Share  | 0.00                | 0.00                  |  |
|  | 0.00                | 0.00                  |  |
| (ii) "Levin" Share   | 0.00                | 0.00                  |  |
| (b) Federal Election Activity Paid Entirely With Federal Funds     | 0.00                | 0.00                  |  |
| (c) Total Federal Election Activity (add                           | 0.00                | 7 7                   |  |
| Lines 30(a)(i), 30(a)(ii) and 30(b))▶                              | 0.00                | 0.00                  |  |
|  | 7                   |                       |  |
| Total Disbursements (add Lines 21(c), 22,                          |                     |                       |  |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c))                           | 28889.96            | 28889.96              |  |
|  | 7                   |                       |  |
| Total Federal Disbursements  |                     |                       |  |
| (subtract Line 21(a)(ii) and Line 30(a)(ii)                        |                     |                       |  |
| from Line 31)  | 28889.96            | 28889.96              |  |

#### **DETAILED SUMMARY PAGE**

of Disbursements

| III. Net Contributions/Operating Expenditures                               | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 3. Total Contributions (other than loans) (from Line 11(d), page 3)         | 19625.46                      | 19625.46                          |
| 4. Total Contribution Refunds (from Line 28(d))                             | 0.00                          | 0.00                              |
| 5. Net Contributions (other than loans) (subtract Line 34 from Line 33)     | 19625.46                      | 19625.46                          |
| 3. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 11389.96                      | 11389.96                          |
| '. Offsets to Operating Expenditures (from Line 15, page 3)                 | 0.00                          | 0.00                              |
| Net Operating Expenditures     (subtract Line 37 from Line 36)              | 11389.96                      | 11389.96                          |

1mage# 14960722811 PAGE 6 / 34

#### : 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC '5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F3XN Transaction ID :

The expenditures listed as Strategic Management Services on Schedule B were not made on behalf of any federal candidates and were properly disclosed on the corresponding disbursement schedule of the report. The expenditures disclosed on Schedule B for Communications Services are not public communications or voter drive activity containing express advocacy. These expenditures were made exclusively to support the activities of VoteVets.

Form/Schedule: Transaction ID:

FOR LINE NUMBER: **PAGE** 7 OF 34 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) VOTEVETS Full Name (Last, First, Middle Initial) Andrew Horne Date of Receipt Mailing Address 517 West Ormsby Ave 07 2014 City State Zip Code Transaction ID: C20580433A KY Louisville 40203 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Horne Law Office Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General \* Earmarked Contribution: See Below 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. ACTBLUE Date of Receipt Mailing Address PO Box 382110 02 04 2014 City State Zip Code Transaction ID: C20580433AB MA 02238-2110 Cambridge Amount of Each Receipt this Period FEC ID number of contributing 250.00 C00401224 federal political committee. Name of Employer Occupation Conduit total listed in Agg. field Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General Note: Above Contribution earmarked through this 7717.46 Other (specify) organization. Full Name (Last, First, Middle Initial) c. Andrew Horne Date of Receipt Mailing Address 517 West Ormsby Ave M M / 2014 03 13 City State Zip Code Transaction ID: C20580862A KY Louisville 40203 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Horne Law Office Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General \* Earmarked Contribution: See Below 350.00 Other (specify) 350.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: **PAGE** 8 OF 34 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) VOTEVETS Full Name (Last, First, Middle Initial) ACTBLUE Date of Receipt Mailing Address PO Box 382110 03 2014 21 City Zip Code State Transaction ID: C20580862AB Cambridge MA 02238-2110 Amount of Each Receipt this Period FEC ID number of contributing C00401224 100.00 federal political committee. Name of Employer Occupation Conduit total listed in Agg. field Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General Note: Above Contribution earmarked through this 7717.46 Other (specify) organization. Full Name (Last, First, Middle Initial) B. Koby Langley Date of Receipt Mailing Address 12304 Thomas Prospect Dr 03 23 2014 City State Zip Code Transaction ID: C20580950A MD **Bowie** 20720 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation **Unites States** Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General \* Earmarked Contribution: See Below 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. ACTBLUE Date of Receipt Mailing Address PO Box 382110 03 31 2014 City Zip Code State Transaction ID: C20580950AB MA Cambridge 02238-2110 Amount of Each Receipt this Period FEC ID number of contributing 125.00 C C00401224 federal political committee. Name of Employer Occupation Conduit total listed in Agg. field Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General Note: Above Contribution earmarked through this 7717.46 Other (specify) organization. 125.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: **PAGE** 9 OF 34 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) VOTEVETS Full Name (Last, First, Middle Initial) Koby Langley Date of Receipt Mailing Address 12304 Thomas Prospect Dr 03 2014 23 City Zip Code State Transaction ID: C20580951A MD Bowie 20720 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation **Unites States** Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General \* Earmarked Contribution: See Below 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. ACTBLUE Date of Receipt Mailing Address PO Box 382110 03 31 2014 City State Zip Code Transaction ID: C20580951AB MA 02238-2110 Cambridge Amount of Each Receipt this Period FEC ID number of contributing 125.00 C00401224 federal political committee. Name of Employer Occupation Conduit total listed in Agg. field Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General Note: Above Contribution earmarked through this 7717.46 Other (specify) organization. Full Name (Last, First, Middle Initial) c. Patrick Pound Date of Receipt Mailing Address 1515 Dock St M = M 2013 12 31 #519 City Zip Code State Transaction ID: C20580242A WA Tacoma 98402-3257 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Program Integrator Department of Defense Receipt For: Aggregate Year-to-Date ▼ Primary General \* Earmarked Contribution: See Below 250.00 Other (specify) 375.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

9

FOR LINE NUMBER: PAGE 10 OF 34 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) VOTEVETS Full Name (Last, First, Middle Initial) ACTBLUE Date of Receipt Mailing Address PO Box 382110 13 2014 City Zip Code State Transaction ID: C20580242AB Cambridge MA 02238-2110 Amount of Each Receipt this Period FEC ID number of contributing C00401224 250.00 federal political committee. Name of Employer Occupation Conduit total listed in Agg. field Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General Note: Above Contribution earmarked through this 7717.46 Other (specify) organization. Full Name (Last, First, Middle Initial) B. Travis Wagner Date of Receipt Mailing Address 1111 Horizon Drive Suite 609 01 15 2014 City State Zip Code Transaction ID: C20580476A **Grand Junction** CO 81506 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation N/A Retired Receipt For: Aggregate Year-to-Date ▼ Primary General \* Earmarked Contribution: See Below 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. ACTBLUE Date of Receipt Mailing Address PO Box 382110 02 04 2014 City Zip Code State Transaction ID: C20580476AB MA Cambridge 02238-2110 Amount of Each Receipt this Period FEC ID number of contributing 100.00 C C00401224 federal political committee. Name of Employer Occupation Conduit total listed in Agg. field Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General Note: Above Contribution earmarked through this 7717.46 Other (specify) organization. 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 

|  | FOR LINE NUMBER: | :   PAGE 11 OF 34 |
|--|------------------|-------------------|
| Use separate schedule(s)                       | (check only one) |                   |
| for each category of the Detailed Summary Page | X 11a 11b        | 11c 12            |
|  | 13 14            | 15 16 17          |

|  | d Statements may not be sold or used by any per-<br>the name and address of any political committee t |  |
|--|---|--|
| NAME OF COMMITTEE (In Full)                                |   |  |
| VOTEVETS   |   |  |
| Full Name (Last, First, Middle Initial)  1. Travis Wagner  |   | Date of Receipt  |
| Mailing Address 1111 Horizon Drive                         |   | M - M / D - D / Y - Y - Y - Y                                    |
| Suite 609  | Chata 75- 0-1   | 02 15 2014   |
| City Grand Junction  | State Zip Code<br>CO 81506  | Transaction ID : C20580570A                                      |
|  |   | Amount of Each Receipt this Period                               |
| FEC ID number of contributing federal political committee. | C   | 100.00   |
| Name of Employer   | Occupation  |  |
| N/A  | Retired   | _  |
| Receipt For:   | Aggregate Year-to-Date ▼  |  |
| Primary General Other (specify) ▼                          | 300.00  | * Earmarked Contribution: See Below                              |
| Outer (Specify) ♥  | 300.00  |  |
| Full Name (Last, First, Middle Initial)  ACTBLUE           |   | Date of Receipt  |
| Mailing Address PO Box 382110                              |   | M = M / D = D / Y = Y = Y = Y                                    |
| City   | State Zip Code  | 03 14 2014   |
| City<br>Cambridge  | State Zip Code  MA 02238-2110   | Transaction ID : C20580570AB  Amount of Each Receipt this Period |
| FEC ID number of contributing                              |   | Amount of Lacif neceipt this Period                              |
| federal political committee.                               | C C00401224   | 100.00   |
| Name of Employer   | Occupation  | 1  |
|  | Conduit total listed in Agg. field  | _  |
| Receipt For:   | Aggregate Year-to-Date ▼  | [MEMO ITEM]  |
| Primary General  Other (specify) ▼                         | 7717.46   | Note: Above Contribution earmarked through this organization.    |
| Full Name (Last, First, Middle Initial)  Travis Wagner     | •   | Date of Receipt  |
| Mailing Address 1111 Horizon Drive                         |   | M = M / D = D / Y = Y = Y  |
| Suite 609  | Chata 7' O '  | 03 15 2014   |
| City Grand Junction  | State Zip Code<br>CO 81506  | Transaction ID : C20580931A                                      |
|  |   | Amount of Each Receipt this Period                               |
| FEC ID number of contributing federal political committee. | С   | 100.00   |
| Name of Employer   | Occupation  | 1  |
| N/A  | Retired   | _  |
| Receipt For:   | Aggregate Year-to-Date ▼  |  |
| Primary General  | 300.00  | * Earmarked Contribution: See Below                              |
| Other (specify) ▼  | 300.00  |  |
| SURTOTAL of Possinto This Page /cell   1                   | •   | 200.00   |
| TOTAL OF NECEIPES THIS Page (optional).                    | <u> </u>  |  |
| TOTAL This Period (last page this line number              | er only)  |  |

|   | FO          | R LINE   | NU | MBER | : | PAGE | · | 12 OF | 34 |
|---|-------------|----------|----|------|---|------|---|-------|----|
| Use separate schedule(s) for each category of the | (ch         | eck only | or | ne)  |   |      |   |       |    |
| Detailed Summary Page                             | <b>&gt;</b> | 11a      |    | 11b  |   | 11c  |   | 12    |    |
|   |             | 13       |    | 14   |   | 15   |   | 16    | 17 |

|   | and Statements may not be sold or used by any per<br>ng the name and address of any political committee |  |
|---|---|--|
| NAME OF COMMITTEE (In Full) VOTEVETS  |   |  |
| Full Name (Last, First, Middle Initial) A. ACTBLUE  Mailing Address PO Box 382110 |   | Date of Receipt  |
|   |   | 03 21 2014   |
| City<br>Cambridge   | State Zip Code<br>MA 02238-2110   | Transaction ID : C20580931AB   |
| FEC ID number of contributing federal political committee.                        | C C00401224   | Amount of Each Receipt this Period  100.00                                 |
| Name of Employer  | Occupation Conduit total listed in Agg. field   |  |
| Receipt For:  Primary General  Other (specify) ▼                                  | Aggregate Year-to-Date ▼ 7717.46  | [MEMO ITEM]  Note: Above Contribution earmarked through this organization. |
| Full Name (Last, First, Middle Initial)  3.  Mailing Address                      |   | Date of Receipt  |
| City  | State Zip Code  | Amount of Each Possint this Pariad   |
| FEC ID number of contributing federal political committee.                        | C   | Amount of Each Receipt this Period   |
| Name of Employer  | Occupation  |  |
| Receipt For:  Primary General  Other (specify) ▼                                  | Aggregate Year-to-Date ▼  |  |
| Full Name (Last, First, Middle Initial)   |   | Date of Receipt  |
| Mailing Address   |   | M = M / D = D / Y = Y = Y  |
| City  | State Zip Code  | Amount of Each Receipt this Period   |
| FEC ID number of contributing federal political committee.                        | C   | Table of East Hoodpt tills Forlish   |
| Name of Employer  | Occupation  |  |
| Receipt For:  Primary General  Other (specify) ▼                                  | Aggregate Year-to-Date ▼  |  |
| SUBTOTAL of Receipts This Page (option  | nal)  | 0.00   |
| · · · · · · · · · · · · · · · · · · ·   | <u> </u>  | 1150.00  |
| IUIAL Inis Period (last page this line nu   | imber only)   | 1100.00  |

|  | CHEDULE A (FEC Form 3X)   |             | Use separate schedule(s)                       | FOR LINE NUMBER: PAGE 13 OF 34 (check only one) |  |  |  |
|--|---|-------------|--|---|--|--|--|
| П  | EMIZED RECEIPTS   |             | for each category of the Detailed Summary Page | 11a 11b X 11c 12                                |  |  |  |
|  | ny information copied from such Reports and State for commercial purposes, other than using the |             |  |   |  |  |  |
|  | NAME OF COMMITTEE (In Full) VOTEVETS  |             |  |   |  |  |  |
| <b>A</b> .   | Full Name (Last, First, Middle Initial) AMERICAN FEDERATION OF GOVT.                            | EMPL. P     | OLITICAL ACTIO                                 | Date of Receipt                                 |  |  |  |
|  | Mailing Address 80 F Street NW  | 03 31 2014  |  |   |  |  |  |
|  | City<br>Washington  | State<br>DC | Zip Code<br>20001                              | Transaction ID: C20567669                       |  |  |  |
|  | FEC ID number of contributing federal political committee.                                      |             | 0009936  | Amount of Each Receipt this Period 5000.00      |  |  |  |
|  | Name of Employer  | Occupation  |  |   |  |  |  |
|  | Receipt For:  Primary General  Other (specify) ▼  | Aggregate   | Year-to-Date ▼ 5000.00                         |   |  |  |  |
| <del>-</del><br>В.   | Full Name (Last, First, Middle Initial) INTL UNION OF BRICKLAYERS & A                           | ALLIED C    | RAFTWORKERS PAC                                | Date of Receipt                                 |  |  |  |
|  | Mailing Address 620 F STREET, NW SUITE 900  | SUITE 900   |  | 03 31 2014                                      |  |  |  |
|  | City<br>WASHINGTON  | State<br>DC | Zip Code<br>20004                              | Transaction ID : C20567668                      |  |  |  |
|  | FEC ID number of contributing   |             |  | Amount of Each Receipt this Period              |  |  |  |
|  | federal political committee.  | C coo       | 0003632  | 2500.00   |  |  |  |
|  | Name of Employer  | Occupation  | 1  |   |  |  |  |
|  | Receipt For:  | Aggregate   | Year-to-Date ▼                                 |   |  |  |  |
|  | Primary General  Other (specify) ▼  |             | 2500.00  |   |  |  |  |
| <u>с</u> .   | Full Name (Last, First, Middle Initial)   |             |  | Date of Receipt                                 |  |  |  |
|  | Mailing Address   |             |  | M = M / D = D / Y = Y = Y                       |  |  |  |
|  | City  | State       | Zip Code                                       | Amount of Each Receipt this Period              |  |  |  |
| FEC ID number of contributing federal political committee.  Name of Employer |   | С           |  |   |  |  |  |
|  |   | Occupation  | 1  |   |  |  |  |
|  | Receipt For:  Primary General  Other (specify) ▼  | Aggregate   | Year-to-Date ▼                                 |   |  |  |  |
| S  | UBTOTAL of Receipts This Page (optional)  |             |  | 7500.00   |  |  |  |

TOTAL This Period (last page this line number only).....

7500.00

| SCHEDULE B (FEC Form 3X)   |  | FOR LINE          | NUMBER:    | PAGE 14 OF 34                 |
|--|--|-------------------|------------|-------------------------------|
| ITEMIZED DISBURSEMENTS   | Use separate schedule(s for each category of the | ) (check only     | one)       |                               |
|  | Detailed Summary Page                            | X 21b             | 22         | 23 24 25 26                   |
| Г  |  | 27                | 28a        | 28b 28c 29 30                 |
| Any information copied from such Reports and Stat<br>or for commercial purposes, other than using the na |  |                   |            |                               |
| NAME OF COMMITTEE (In Full)  |  |                   |            |                               |
| │  |  |                   |            |                               |
| Full Name (Last, First, Middle Initial)  |  |                   |            |                               |
| A. ActBlue Technical Services  |  |                   | Date of Di | isbursement                   |
| Mailing Address 14 Arrow Street  |  |                   | 01         | 13 2014                       |
| City   | State Zip Code                                   |                   |            |                               |
| Cambridge  | MA 02138   |                   | Transact   | tion ID : D578373             |
| Purpose of Disbursement Credit Card Processing Fees  |  |                   | Amount of  | Each Disbursement this Period |
| Candidate Name   |  | Category/         |            |                               |
|  |  | Type              |            | 4.43                          |
|  | ement For:                                       |                   |            |                               |
| Senate<br>President  | Primary General                                  |                   |            |                               |
| State: District:   | Other (specify) ▼                                |                   |            |                               |
| Full Name (Last, First, Middle Initial)  |  |                   |            |                               |
| B. ActBlue Technical Services  |  |                   | Date of Di | isbursement                   |
|  |  |                   | M = M /    | / D D / Y Y Y Y               |
| Mailing Address 14 Arrow Street  |  |                   | 01         | 13 2014                       |
| City   | State Zip Code                                   |                   | Transac    | tion ID : D578374             |
| Cambridge Purpose of Disbursement  | MA 02138   | <u> </u>          |            |                               |
| Credit Card Processing Fees  |  |                   | Amount of  | Each Disbursement this Period |
| Candidate Name   |  | Category/         |            |                               |
|  |  | Type              |            | 1.59                          |
|  | ement For:                                       |                   |            |                               |
| Senate   | Primary General                                  |                   |            |                               |
| President State: District:   | Other (specify) ▼                                |                   |            |                               |
| Full Name (Last, First, Middle Initial)  |  |                   |            |                               |
| C. ActBlue Technical Services  |  |                   | Date of Di | isbursement                   |
|  |  |                   | M = M /    | / D D / Y Y Y Y               |
| Mailing Address 14 Arrow Street  |  |                   | 01         | 13 2014                       |
| City   | State Zip Code                                   |                   | _          |                               |
| Cambridge  | MA 02138   |                   | Transac    | tion ID : D578375             |
| Purpose of Disbursement Credit Card Processing Fees  |  |                   |            |                               |
| Candidate Name   |  |                   | Amount of  | Each Disbursement this Period |
| Candidate Name   |  | Category/<br>Type |            | 29.32                         |
| Office Sought: House Disburs   | ement For:                                       | Турс              |            |                               |
| Senate   | Primary General                                  |                   |            |                               |
| President  | Other (specify) ▼                                |                   |            |                               |
| State: District:   |  |                   |            |                               |
|  |  |                   |            | 25.24                         |
| SUBTOTAL of Disbursements This Page (optional)   |  | ·····•            |            | 35.34                         |
| TOTAL This Period (last page this line number onl  | v)   |                   |            |                               |
| I  | , ,  |                   |            | 7                             |

| SCHEDULE B (FEC Form 3X)  |  | FOR LINE          |            |                               |  |  |  |
|---|--|-------------------|------------|-------------------------------|--|--|--|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s for each category of the | (Cricck offi)     |            |                               |  |  |  |
|   | Detailed Summary Page                            | X 21b 27          | 22         | 23 24 25 26<br>28b 28c 29 30b |  |  |  |
| Г   |  |                   | 28a        |                               |  |  |  |
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| NAME OF COMMITTEE (In Full)   |  |                   |            |                               |  |  |  |
| ∕ VOTEVETS  |  |                   |            |                               |  |  |  |
| Full Name (Last, First, Middle Initial)   |  |                   |            |                               |  |  |  |
| A. ActBlue Technical Services   |  |                   |            | isbursement                   |  |  |  |
| Mailing Address 14 Arrow Street   |  |                   | 01         | 13 2014                       |  |  |  |
| City  | State Zip Code                                   |                   | <b>T</b>   | ilan ID. DEZCOZO              |  |  |  |
| Cambridge   | MA 02138   |                   | Iransaci   | tion ID : D578376             |  |  |  |
| Purpose of Disbursement Credit Card Processing Fees   |  |                   | Amount of  | Each Disbursement this Period |  |  |  |
| Candidate Name  |  | Category/         |            | 1.97                          |  |  |  |
| Office Sought: House Disburse   | ment For:  | Туре              |            | <i>x</i>                      |  |  |  |
| Senate Disburser  | Primary General                                  |                   |            |                               |  |  |  |
| President   | Other (specify)                                  |                   |            |                               |  |  |  |
| State: District:  | ( 1  |                   |            |                               |  |  |  |
| Full Name (Last, First, Middle Initial)   |  |                   |            |                               |  |  |  |
| B. ActBlue Technical Services   |  |                   | Date of Di | isbursement                   |  |  |  |
|   |  |                   | M = M /    | D D / Y Y Y Y                 |  |  |  |
| Mailing Address 14 Arrow Street   |  |                   | 02         | 04 2014                       |  |  |  |
| ,   | State Zip Code                                   |                   | Transact   | tion ID : D581397             |  |  |  |
| Cambridge Purpose of Disbursement   | MA 02138   | I                 |            |                               |  |  |  |
| Credit Card Processing Fees   |  |                   | Amount of  | Each Disbursement this Period |  |  |  |
| Candidate Name  |  | Category/         |            |                               |  |  |  |
|   |  | Type              |            | 59.27                         |  |  |  |
| Office Sought: House Disburser  | ment For:  | ,                 |            |                               |  |  |  |
| Senate  | Primary General                                  |                   |            |                               |  |  |  |
| President   | Other (specify) ▼                                |                   |            |                               |  |  |  |
| State: District:  |  |                   |            |                               |  |  |  |
| Full Name (Last, First, Middle Initial)   |  |                   | Data of Di | isbursement                   |  |  |  |
| C. ActBlue Technical Services   |  |                   |            |                               |  |  |  |
| Mailing Address 14 Arrow Street   |  |                   | 02         | 04 2014                       |  |  |  |
| Training Training Training Substitution   |  |                   |            |                               |  |  |  |
| City  | State Zip Code                                   |                   | Transact   | tion ID : D581398             |  |  |  |
| Cambridge   | MA 02138   |                   | Transaci   | 101110 . 0301330              |  |  |  |
| Purpose of Disbursement Credit Card Processing Fees   |  |                   |            |                               |  |  |  |
| Candidate Name  |  |                   | Amount of  | Each Disbursement this Period |  |  |  |
| Candidate Name  |  | Category/<br>Type |            | 9.49                          |  |  |  |
| Office Sought: House Disburser  | ment For:  | Туре              |            |                               |  |  |  |
| Senate  | Primary General                                  |                   |            |                               |  |  |  |
| President   | Other (specify) ▼                                |                   |            |                               |  |  |  |
| State: District:  | ·<br>  |                   |            |                               |  |  |  |
|   |  |                   |            |                               |  |  |  |
| SUBTOTAL of Disbursements This Page (optional)  |  |                   |            | 70.73                         |  |  |  |
|   |  |                   | -          |                               |  |  |  |
| TOTAL This Period (last page this line number only)   | )  |                   |            | <i></i>                       |  |  |  |

| SCHEDULE B (FEC Form 3X)  | Use separate schedule(s)                       | FOR LINE             |                     | PAGE 16 OF 34                  |
|---|--|----------------------|---------------------|--------------------------------|
| ITEMIZED DISBURSEMENTS  | for each category of the Detailed Summary Page | (check only X 21b 27 | one) 22 23 28a 28b  | 24 25 26<br>28c 29 36          |
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| NAME OF COMMITTEE (In Full)  VOTEVETS   | is and address of any pointer                  | ar committee to      | SOICH CONTINUATIONS | nom such committee.            |
| Full Name (Last, First, Middle Initial)   |  |                      | Data of Dishaman    |                                |
| A. ActBlue Technical Services   |  |                      | Date of Disbursen   |                                |
| Mailing Address 14 Arrow Street   |  |                      | 02 04               |                                |
| ,   | State Zip Code                                 |                      | Transaction ID :    | D581300                        |
| Cambridge Purpose of Disbursement   | MA 02138                                       |                      | Transaction ib .    | D301333                        |
| Credit Card Processing Fees   |  |                      | Amount of Each D    | Disbursement this Period       |
| Candidate Name  |  | Category/            |                     |                                |
|   |  | Туре                 |                     | 5.96                           |
| Office Sought: House Disbursen Senate President   | nent For: Primary General Other (specify) ▼    |                      |                     |                                |
| State: District:  |  |                      |                     |                                |
| Full Name (Last, First, Middle Initial)   |  |                      |                     |                                |
| B. ActBlue Technical Services   |  |                      | Date of Disbursen   |                                |
| Mailing Address 14 Arrow Street   |  |                      | 02 19               |                                |
| City S<br>Cambridge   | State Zip Code<br>MA 02138                     |                      | Transaction ID :    | D582725                        |
| Purpose of Disbursement Credit Card Processing Fees   |  |                      | Amount of Each D    | Disbursement this Period       |
| Candidate Name  |  | Category/<br>Type    |                     | 1.08                           |
|   | nent For: Primary General Other (specify)      |                      |                     |                                |
| Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  |  |                      | Date of Disbursen   | nent                           |
| Mailing Address 14 Arrow Street   |  |                      | 02 19               |                                |
| •   | State Zip Code<br>MA 02138                     |                      | Transaction ID :    | D582726                        |
| Purpose of Disbursement<br>Credit Card Processing Fees  |  |                      |                     |                                |
| Candidate Name  |  | Category/<br>Type    | Amount of Each D    | Disbursement this Period 15.95 |
| Office Sought: House Disbursen Senate President State: District:  | nent For: Primary General Other (specify)      | Турс                 |                     |                                |
| State: District:  SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only) |  |                      |                     | 22.99                          |

| Use separate schedule(s) for each category of the Detailed Summary Page    Summary Page   Summa  | SCHEDULE B (FEC Form 3X)                            |                   | FOR LINE    | R LINE NUMBER: PAGE 17 OF 34 |                               |  |  |  |  |  |  |  |  |  |
|--|---|-------------------|-------------|------------------------------|-------------------------------|--|--|--|--|--|--|--|--|--|
| Detailed Surmary Page    27   28a   28b   28c   29   30b   30c     | ITEMIZED DISBURSEMENTS                              |                   | (check only | one)                         |                               |  |  |  |  |  |  |  |  |  |
| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee.  NAME OF COMMITTEE (in Full)  VOTEVETS  Full Name (Last, First, Middle Initial)  A. ActBlue Technical Services  Mailing Address 14 Arrow Street  City Cambridge MA 02138  Primase of Disbursement Credit Card Processing Fees Candidate Name  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  B. ActBlue Technical Services  Mailing Address 14 Arrow Street  City Cambridge MA 02138  Primasy Disbursement For:  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement  Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  B. ActBlue Technical Services  Mailing Address 14 Arrow Street  Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City Cambridge MA 02138  Transaction ID: D584001  Amount of Each Disbursement  Category/ Type  Other (specify) ▼  Date of Disbursement  Date of Disbursement  Date of Disbursement  Transaction ID: D584001  Amount of Each Disbursement  Category/ Type  Transaction ID: D584001  Amount of Each Disbursement  Date of Disbursement  Date of Disbursement  Transaction ID: D584001  Amount of Each Disbursement  Date of Disbursement  State:  Date of Disbursement  Date of Dis  |   |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| NAME OF COMMITTEE (in Full)  NAME OF COMMITT  | [   |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  A. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Office Sought: House Disbursement For: Senate President State: Disbursement Credit Card Processing Fees  Calegory' 10.52  Transaction ID: D584000  Amount of Each Disbursement this Period  Category' 10.52  Transaction ID: D584001  Amount of Each Disbursement Mailing Address 14 Arrow Street  City State Zip Code MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name Category' 10.52  Transaction ID: D584001  Amount of Each Disbursement this Period  Category' 10.52  Transaction ID: D584001  Amount of Each Disbursement this Period  Candidate Name Category' 10.52  Transaction ID: D584001  Amount of Each Disbursement this Period  Category' 10.52  Transaction ID: D584001  Transaction ID: D584001  Transaction ID: D584001  Amount of Each Disbursement this Period  Category' 10.52  Transaction ID: D584002  Amount of Each Disbursement Credit Card Processing Fees  Candidate Name Category' 17ppe  Office Sought: House Disbursement For: Category' 17ppe  Office Sought: House Disbursement Primary General Primary Category' 17ppe  Office Sought: House Disbursement Primary General Primary Genera |   |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Carnindge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  City Senate Prisident Dishire  Full Name (Last, First, Middle Initial)  B. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cardogory/ Type  Office Sought: House Disbursement For: Senate Primary General Primary   |   |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| A. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Office Sought: House Senate Primary General Primary General Processing Fees  Cambridge Technical Services  Mailing Address 14 Arrow Street  City State Zip Code MA 02138  B. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code MA 02138  Purpose of Disbursement For: Senate Primary General Processing Fees  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General  | │   |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| A. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Office Sought: House Senate President Disbursement For: Senate Primary General Processing Fees  Cambridge Technical Services  Mailing Address 14 Arrow Street  City State Zip Code MA 02138  B. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code MA 02138  Purpose of Disbursement For: Senate Primary General Processing Fees  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Primary Gene  | Full Name (Last, First, Middle Initial)             |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| Mailing Address 14 Arrow Street  City City City Cambridge Candidate Name City City City City City City City City   |   |                   |             | Date of Dis                  | sbursement                    |  |  |  |  |  |  |  |  |  |
| City Cambridge MA  O2138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Categoryi Type  Office Sought:  Full Name (Last. First, Middle Initial) B. ActBlue Technical Services  Mailing Address 14 Arrow Street  Categoryi Transaction ID: D584000  Amount of Each Disbursement this Period  Date of Disbursement  Transaction ID: D584000  Amount of Each Disbursement this Period  Date of Disbursement  Transaction ID: D584000  Amount of Each Disbursement this Period  Date of Disbursement  Transaction ID: D584001  Amount of Each Disbursement  Transaction ID: D584001  Transaction ID: D584001  Date of Disbursement  Transaction ID: D584001  Date of Disbursement  Transaction ID: D584001  Date of Disbursement this Period  Categoryi  Office Sought:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City Cambridge  MA  O2138  Date of Disbursement this Period  Categoryi  Other (specify) ▼  Date of Disbursement  Transaction ID: D584001  Transaction I  | <del> </del>  |                   |             | M = M /                      |                               |  |  |  |  |  |  |  |  |  |
| Cambridge MA 02138 Purpose of Disbursement Credit Card Processing Fees Candidate Name  Office Sought: House Prisadent Prisadent Prisadent State: Disbursement For: Senate Prisadent Prisa  | Mailing Address 14 Arrow Street                     |                   |             | 03                           | 14 2014                       |  |  |  |  |  |  |  |  |  |
| Cambridge MA 02138 Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Disbursement To: Senate Primary General Other (specify) ▼  Date of Disbursement Credit Card Processing Fees  Category/ Type  Date of Disbursement  Credit Card Processing Fees  Category/ Type  Date of Disbursement  Credit Card Processing Fees  Candidate Name  Category/ Type  Date of Disbursement  Credit Card Processing Fees  Candidate Name  Disbursement For: Senate President State: Disbursement For: Senate President State: Disbursement For: Senate President State: Disbursement Credit Card Processing Fees  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Amount of Each Disbursement this Period  Date of Disbursement  Date of Disbursement  Transaction ID: D584001  Amount of Each Disbursement  Date of Disbursement  Category/ Type  Date of Disbursement  Date of Disbursement  Category/ Type  Date of Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement  Category/ Type  Date of Disbursement  Date of Di  | City  | State Zip Code    |             | <b>T</b>                     | ID DE04000                    |  |  |  |  |  |  |  |  |  |
| Credit Card Processing Fees  Candidate Name  Category/  Office Sought: House President Primary General Primar  | S .   | MA 02138          |             | iransacti                    | lon เม : ม584000              |  |  |  |  |  |  |  |  |  |
| Office Sought:   |   |                   |             | Amount of                    | Each Disbursement this Period |  |  |  |  |  |  |  |  |  |
| Office Sought: House President Primary General Primary General Primary General President State: District:  Full Name (Last, First, Middle Initial)  B. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name Category/ Type  Office Sought: House President Primary General Primary General Primary General Credit Card Processing Fees  Category/ Type  City State Zip Code Category/ Type  Other (specify) ▼  Date of Disbursement this Period  Transaction ID: D584001  Amount of Each Disbursement  Category/ Type  Date of Disbursement  Transaction ID: D584002  Transaction ID: D584002  Transaction ID: D584002  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Garden Primary General Disbursement This Period  State: District: District: District: Senate Primary General Other (specify) ▼  Transaction ID: D584002  Transaction ID: D584002  Amount of Each Disbursement this Period  Transaction ID: D584002  Transaction ID: D584002  Amount of Each Disbursement this Period  Transaction ID: D584002  Transaction ID: D584002  Amount of Each Disbursement Transaction ID: D584002  Amount of Each Disbursement Transaction ID: D584002   | Candidate Name                                      |                   | Category/   |                              |                               |  |  |  |  |  |  |  |  |  |
| Senate President Other (specify) ▼  Primary General Other (specify) ▼  Prosident District:  Full Name (Last, First, Middle Initial)  B. ActBlue Technical Services  Malling Address 14 Arrow Street  City State Zip Code MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name Category/ Type  Office Sought: House President Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name Category/ Type  Office Sought: House Disbursement Credit Card Processing Fees  Candidate Name Category/ Type  Office Sought: House Disbursement For: Category/ Type  Offic  |   |                   |             |                              | 10.52                         |  |  |  |  |  |  |  |  |  |
| State: District: Other (specify) ▼  Full Name (Last, First, Middle Initial)  B. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name Disbursement For: Senate President Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement For: Senate President Other (specify) ▼  Transaction ID: D584001  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  Credit Card Processing Fees  Candidate Name Category/ Type  Office Sought: House Disbursement For: Senate Purpose of Disbursement  Credit Card Processing Fees  Candidate Name Category/ Type  Office Sought: House Disbursement For: Senate Primary General President  State: District:  Substotal of Disbursements This Page (optional)   |   |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| State: District: Full Name (Last, First, Middle Initial)  B. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Office Sought: House Primary General President State: District:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  Disbursement For: Senate Primary General Other (specify) Type  Date of Disbursement this Period  Transaction ID: D584001  Amount of Each Disbursement this Period  Date of Disbursement this Period  Date of Disbursement this Period  Transaction ID: D584001  Transaction ID: D584001  Date of Disbursement  Date of Disbursement  Transaction ID: D584002  Transaction ID: D584002  Amount of Each Disbursement this Period  Cartegory/Type  Office Sought: House President Other (specify) General Primary General  |   |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| B. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  District:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Category/ Type  Office Sought: House Disbursement For:  City State Zip Code MA 02138  Purpose of Disbursement  Category/ Type  Date of Disbursement  Transaction ID : D584001  Amount of Each Disbursement this Period  Date of Disbursement  Transaction ID : D584001  Amount of Each Disbursement this Period  Transaction ID : D584002  Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Senate President State: District:  Substortal of Disbursement This Page (optional)  |   | Officer (specify) |             |                              |                               |  |  |  |  |  |  |  |  |  |
| B. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  District:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Category/ Type  Office Sought: House Disbursement For:  City State Zip Code MA 02138  Purpose of Disbursement  Category/ Type  Date of Disbursement  Transaction ID : D584001  Amount of Each Disbursement this Period  Date of Disbursement  Transaction ID : D584001  Amount of Each Disbursement this Period  Transaction ID : D584002  Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Senate President State: District:  Substortal of Disbursement This Page (optional)  | Full Name (Last, First, Middle Initial)             |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| Mailing Address 14 Arrow Street  City State Zip Code MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Date of Disbursement  Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Substate: Disbursement For: Senate Primary General Other (specify) ▼  Substate: Disbursement For: Senate Primary General Other (specify) ▼  Substate: Disbursements This Page (optional)   | ,   |                   |             | Date of Dis                  | sbursement                    |  |  |  |  |  |  |  |  |  |
| City   |   |                   |             | M = M /                      | D D / Y Y Y Y Y               |  |  |  |  |  |  |  |  |  |
| Cambridge MA 02138 Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Primary General President Other (specify) ▼  Date of Disbursement  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Date of Disbursement  Transaction ID: D584001  Amount of Each Disbursement this Period  Date of Disbursement  Transaction ID: D584002  Transaction ID: D584002  Amount of Each Disbursement  Category/ Type  Other (specify) ▼  State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  SUBTOTAL of Disbursements This Page (optional)   | Mailing Address 14 Arrow Street                     |                   |             | 03                           | 14 2014                       |  |  |  |  |  |  |  |  |  |
| Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Category/ Type  Other (specify) ▼  Date of Disbursement  City State Zip Code MA 02138  Candidate Name  City State Zip Code MA 02138  Candidate Name  Credit Card Processing Fees  Candidate Name  Category/ Type  Date of Disbursement  Transaction ID: D584002  Amount of Each Disbursement  Category/ Type  Transaction ID: D584002  Amount of Each Disbursement  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Subtrotal of Disbursements This Page (optional)   | •   | · ·               |             | Transacti                    | ion ID : D584001              |  |  |  |  |  |  |  |  |  |
| Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Transaction ID: D584002  Amount of Each Disbursement this Period  Transaction ID: D584002  Amount of Each Disbursement this Period  Category/ Type  Senate Primary General Other (specify) ▼  State: District:  SUBTOTAL of Disbursements This Page (optional)   |   | MA 02138          |             |                              |                               |  |  |  |  |  |  |  |  |  |
| Office Sought: House   Disbursement For:   General   Primary   General   President   Other (specify)   Full Name (Last, First, Middle Initial)    C. ActBlue Technical Services   Date of Disbursement   Date of |   |                   |             | Amount of                    | Each Disbursement this Period |  |  |  |  |  |  |  |  |  |
| Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Candidate Name  Disbursement For:  Senate Primary General Other (specify)   Office Sought: House Disbursement For:  Senate President Other (specify)   Other (specify)   State: District:  Substrate: District:   | Candidate Name                                      |                   | Category/   |                              | 0.00                          |  |  |  |  |  |  |  |  |  |
| Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Subtotal Disbursement For:  Senate Primary General Other (specify)  State: District:  Subtotal Disbursement For:  State: District: Subtotal Disbursement For:  State: District: Subtotal Disbursement For:  State: District: Subtotal Disbursement For:  State: District: Subtotal Disbursement For:  State: District: Subtotal Disbursement For:  Subtotal Disbursement For:  Subtotal Disbursement For:  State: District: Subtotal Disbursement For:  Subtotal Disbursement For:  Subtotal Disbursement For:  State: District: Subtotal Disbursement For:  Subtotal Disburseme |   |                   |             |                              | 0.80                          |  |  |  |  |  |  |  |  |  |
| State: District:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name Category/ Type  Office Sought: House Primary General Other (specify)  State: District:  Substortal of Disbursements This Page (optional)  |   |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| State: District:  Full Name (Last, First, Middle Initial)  C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Primary General Other (specify)  State: District:  Substock ActBlue Technical Services  Date of Disbursement  Transaction ID: D584002  Amount of Each Disbursement this Period  Category/ Type  3.85  |   | ,                 |             |                              |                               |  |  |  |  |  |  |  |  |  |
| C. ActBlue Technical Services  Mailing Address 14 Arrow Street  City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Subtrotal of Disbursements This Page (optional)   |   | Curer (openity)   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President State: District:  SUBTOTAL of Disbursements This Page (optional)  | Full Name (Last, First, Middle Initial)             |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| City State Zip Code Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Disbursement For:  Senate Primary General Other (specify) ▼  Substortal of Disbursements This Page (optional)  | C. ActBlue Technical Services                       |                   |             | Date of Dis                  | sbursement                    |  |  |  |  |  |  |  |  |  |
| City State Zip Code MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) State: District:  SUBTOTAL of Disbursements This Page (optional)  | Mailian Address 44.4                                |                   |             | 1                            |                               |  |  |  |  |  |  |  |  |  |
| Cambridge MA 02138  Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President State: District:  Substrict: Primary General Other (specify)   Substrict: 15.17   | Mailing Address 14 Arrow Street                     |                   |             | 03                           | 14 ZU14                       |  |  |  |  |  |  |  |  |  |
| Cambridge Purpose of Disbursement Credit Card Processing Fees  Candidate Name  Category/ Type  Office Sought:  House Senate Primary President State:  District:  Substract  Other (specify)  Substract  Substract | City  | State Zip Code    |             | Transacti                    | ion ID - D59/002              |  |  |  |  |  |  |  |  |  |
| Credit Card Processing Fees  Candidate Name  Category/ Type  3.85  Office Sought: House Senate Primary General Other (specify)  State: District:  SUBTOTAL of Disbursements This Page (optional)   |   | MA 02138          |             | iransacti                    | טו ווט : טספ4002              |  |  |  |  |  |  |  |  |  |
| Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  SUBTOTAL of Disbursement This Page (optional)   |   |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District:  SUBTOTAL of Disbursements This Page (optional)   | <u> </u>  |                   |             | Amount of                    | Each Disbursement this Period |  |  |  |  |  |  |  |  |  |
| Office Sought: House Disbursement For: Senate Primary General President Other (specify)  State: District:  SUBTOTAL of Disbursements This Page (optional)  | Canadate Name                                       |                   |             |                              | 3.85                          |  |  |  |  |  |  |  |  |  |
| State: District: Other (specify)   SUBTOTAL of Disbursements This Page (optional)  | Office Sought: House Disburser                      | nent For:         | 21          |                              |                               |  |  |  |  |  |  |  |  |  |
| State: District:  SUBTOTAL of Disbursements This Page (optional)   | Senate  | Primary General   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| SUBTOTAL of Disbursements This Page (optional)   |   | Other (specify) ▼ |             |                              |                               |  |  |  |  |  |  |  |  |  |
| SUBTOTAL OF DISDUTSEMENTS THIS Page (Optional)   | State: District:                                    |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |
| SUBTOTAL OF DISDUTSEMENTS THIS Page (Optional)   |   |                   |             |                              | 15 17                         |  |  |  |  |  |  |  |  |  |
| TOTAL This Period (last page this line number only)  | SUBTUTAL of Disbursements This Page (optional)      |                   | ······      |                              | 10.17                         |  |  |  |  |  |  |  |  |  |
|  | TOTAL This Period (last page this line number only) |                   |             |                              |                               |  |  |  |  |  |  |  |  |  |

| SCHEDULE B (FEC Form 3X)  |  | FOR LINE          | OR LINE NUMBER: PAGE 18 OF 34          |                               |  |  |  |  |  |  |  |  |  |  |
|---|--|-------------------|--|-------------------------------|--|--|--|--|--|--|--|--|--|--|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s for each category of the | (check only       | one)                                   |                               |  |  |  |  |  |  |  |  |  |  |
|   | Detailed Summary Page                            | X 21b 27          | 22                                     | 23 24 25 26<br>28b 28c 29 30b |  |  |  |  |  |  |  |  |  |  |
|   |  |                   | 28a                                    |                               |  |  |  |  |  |  |  |  |  |  |
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| NAME OF COMMITTEE (In Full)   |  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| │   |  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)   |  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| A. ActBlue Technical Services   |  |                   | Date of Dis                            | sbursement                    |  |  |  |  |  |  |  |  |  |  |
|   |  |                   | M = M /                                |                               |  |  |  |  |  |  |  |  |  |  |
| Mailing Address 14 Arrow Street   |  |                   | 03                                     | 21 2014                       |  |  |  |  |  |  |  |  |  |  |
| City  | State Zip Code                                   |                   |  | ID DE04455                    |  |  |  |  |  |  |  |  |  |  |
| Cambridge   | MA 02138   |                   | Transacti                              | ion ID : D584457              |  |  |  |  |  |  |  |  |  |  |
| Purpose of Disbursement Credit Card Processing Fees   |  |                   | Amount of                              | Each Disbursement this Period |  |  |  |  |  |  |  |  |  |  |
| Candidate Name  |  | Category/         |  |                               |  |  |  |  |  |  |  |  |  |  |
|   |  | Type              |  | 51.94                         |  |  |  |  |  |  |  |  |  |  |
|   | ement For:                                       |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| Senate<br>President   | Primary General                                  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| State: District:  | Other (specify) ▼                                |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)   |  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| B. ActBlue Technical Services   |  |                   | Date of Dis                            | sbursement                    |  |  |  |  |  |  |  |  |  |  |
|   |  |                   | M = M /                                | D D / Y Y Y Y Y               |  |  |  |  |  |  |  |  |  |  |
| Mailing Address 14 Arrow Street   |  |                   | 03                                     | 21 2014                       |  |  |  |  |  |  |  |  |  |  |
| City  | State Zip Code                                   |                   | Transact                               | ion ID : D584458              |  |  |  |  |  |  |  |  |  |  |
| Cambridge Purpose of Disbursement   | MA 02138   |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| Credit Card Processing Fees   |  |                   | Amount of Each Disbursement this Perio |                               |  |  |  |  |  |  |  |  |  |  |
| Candidate Name  |  | Category/         | Autour of Lacii Dispulsement tills i   |                               |  |  |  |  |  |  |  |  |  |  |
|   |  | Type              |  | 95.51                         |  |  |  |  |  |  |  |  |  |  |
| Office Sought: House Disburs  | ement For:                                       |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| Senate  | Primary General                                  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| President State: District:  | Other (specify) ▼                                |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)   |  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| C. ActBlue Technical Services   |  |                   | Date of Dis                            | sbursement                    |  |  |  |  |  |  |  |  |  |  |
|   |  |                   | M M /                                  | D D / Y Y Y Y Y               |  |  |  |  |  |  |  |  |  |  |
| Mailing Address 14 Arrow Street   |  |                   | 03                                     | 23 2014                       |  |  |  |  |  |  |  |  |  |  |
| City  | State Zip Code                                   |                   | _                                      |                               |  |  |  |  |  |  |  |  |  |  |
| Cambridge   | MA 02138   |                   | Transact                               | ion ID : D584992              |  |  |  |  |  |  |  |  |  |  |
| Purpose of Disbursement Credit Card Processing Fees   |  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| Candidate Name  |  |                   | Amount of                              | Each Disbursement this Period |  |  |  |  |  |  |  |  |  |  |
| Candidate Name  |  | Category/<br>Type |  | 14.84                         |  |  |  |  |  |  |  |  |  |  |
| Office Sought: House Disburs  | ement For:                                       | турс              |  | 7                             |  |  |  |  |  |  |  |  |  |  |
| Senate  | Primary General                                  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| President   | Other (specify)                                  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
| State: District:  |  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |
|   |  |                   |  | 400.00                        |  |  |  |  |  |  |  |  |  |  |
| SUBTOTAL of Disbursements This Page (optional)  |  | ······•           |  | 162.29                        |  |  |  |  |  |  |  |  |  |  |
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| TOTAL This Period (last page this line number on  | у  |                   |  |                               |  |  |  |  |  |  |  |  |  |  |

| SCHEDULE B (FEC Form 3X)  |   | FOR LINE          | INE NUMBER: PAGE 19 OF 34               |                             |  |  |  |  |  |  |  |  |
|---|---|-------------------|---|-----------------------------|--|--|--|--|--|--|--|--|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the | (Oncor only       |   |                             |  |  |  |  |  |  |  |  |
|   | Detailed Summary Page                             | X 21b             | 22 23                                   |                             |  |  |  |  |  |  |  |  |
| <u> </u>  |   | 27                | 28a 28                                  |                             |  |  |  |  |  |  |  |  |
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| NAME OF COMMITTEE (In Full)   |   |                   |   |                             |  |  |  |  |  |  |  |  |
| → VOTEVETS  |   |                   |   |                             |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)   |   |                   |   |                             |  |  |  |  |  |  |  |  |
| A. ActBlue Technical Services   |   |                   | Date of Disbu                           |                             |  |  |  |  |  |  |  |  |
| Mailing Address 14 Arrow Street   |   |                   | 03                                      | 31 2014                     |  |  |  |  |  |  |  |  |
| City  | State Zip Code                                    |                   | Turnaration                             | ID - DE0C440                |  |  |  |  |  |  |  |  |
| Cambridge   | MA 02138  |                   | Iransaction                             | ID : D586440                |  |  |  |  |  |  |  |  |
| Purpose of Disbursement<br>Credit Card Processing Fees  |   |                   | Amount of Ea                            | ch Disbursement this Period |  |  |  |  |  |  |  |  |
| Candidate Name  |   | Category/         |   | 89.50                       |  |  |  |  |  |  |  |  |
| Office Sought: House Disburs  | sement For:                                       | Туре              |   |                             |  |  |  |  |  |  |  |  |
| Senate  | Primary General                                   |                   |   |                             |  |  |  |  |  |  |  |  |
| President   | Other (specify) ▼                                 |                   |   |                             |  |  |  |  |  |  |  |  |
| State: District:  |   |                   |   |                             |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)   |   |                   |   |                             |  |  |  |  |  |  |  |  |
| B. ADP  |   |                   | Date of Disbu                           | irsement                    |  |  |  |  |  |  |  |  |
| M. W. Ald   |   |                   | 1                                       | D D / Y Y Y Y Y             |  |  |  |  |  |  |  |  |
| Mailing Address 99 Jefferson Rd, Mail Stop 220  |   |                   | 01                                      | 10 2014                     |  |  |  |  |  |  |  |  |
| City  | State Zip Code                                    |                   | Transaction                             | ID : D585899                |  |  |  |  |  |  |  |  |
| Parsippany Purpose of Disbursement  | NJ 07054  |                   | -                                       |                             |  |  |  |  |  |  |  |  |
| Payroll Fees  |   |                   | Amount of Each Disbursement this Period |                             |  |  |  |  |  |  |  |  |
| Candidate Name  |   | Category/         |   |                             |  |  |  |  |  |  |  |  |
|   |   | Type              |   | 74.17                       |  |  |  |  |  |  |  |  |
| Office Sought: House Disburs  | sement For:                                       |                   |   |                             |  |  |  |  |  |  |  |  |
| Senate  | Primary General                                   |                   |   |                             |  |  |  |  |  |  |  |  |
| President   | Other (specify) ▼                                 |                   |   |                             |  |  |  |  |  |  |  |  |
| State: District:  |   |                   |   |                             |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  C. ADP   |   |                   | Date of Disbu                           | ırsement                    |  |  |  |  |  |  |  |  |
| • ADF   |   |                   |   | D D / Y Y Y Y               |  |  |  |  |  |  |  |  |
| Mailing Address 99 Jefferson Rd, Mail Stop 220  |   |                   | 01                                      | 21 2014                     |  |  |  |  |  |  |  |  |
| City  | State Zip Code                                    |                   | Transaction                             | ID : D585901                |  |  |  |  |  |  |  |  |
| Parsippany  | NJ 07054  |                   | Transaction                             | 1 ID . D30390 I             |  |  |  |  |  |  |  |  |
| Purpose of Disbursement Payroll Fees  |   |                   |   |                             |  |  |  |  |  |  |  |  |
| Candidate Name  |   |                   | Amount of Ea                            | ch Disbursement this Period |  |  |  |  |  |  |  |  |
| Canadate Hame   |   | Category/<br>Type |   | 40.00                       |  |  |  |  |  |  |  |  |
| Office Sought: House Disburs  | sement For:                                       | .,,,,             |   |                             |  |  |  |  |  |  |  |  |
| Senate  | Primary General                                   |                   |   |                             |  |  |  |  |  |  |  |  |
| President   | Other (specify) ▼                                 |                   |   |                             |  |  |  |  |  |  |  |  |
| State: District:  |   |                   |   |                             |  |  |  |  |  |  |  |  |
|   |   |                   |   |                             |  |  |  |  |  |  |  |  |
| SUBTOTAL of Disbursements This Page (optional   | )   |                   |   | 203.67                      |  |  |  |  |  |  |  |  |
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| TOTAL This Period (last page this line number or  | lly)  | ·····             |   | 7                           |  |  |  |  |  |  |  |  |

| S           | CHEDULE B (FEC Form 3X)   |   | FO         | LINE NUMBER: PAGE 20 OF 34 |   |         |        |       |      |           |          |        |        |  |
|-------------|---|---|------------|----------------------------|---|---------|--------|-------|------|-----------|----------|--------|--------|--|
| IT          | EMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the | eck or     | ily on                     | e)                                      | _       |        |       |      |           |          |        |        |  |
|             |   | Detailed Summary Page                             |            | <b>X</b> 21k               | ) <u> </u>                              | 22      |        | 23    |      | 24        | 25       |        | 26     |  |
| _           |   |   |            | 27                         |   | 28a     |        | 28b   |      | 28c       | 29       |        | 30b    |  |
|             | ny information copied from such Reports and Staten<br>for commercial purposes, other than using the nam |   |            |                            |   |         |        |       |      |           |          |        | 1      |  |
| $\setminus$ | NAME OF COMMITTEE (In Full)   |   |            |                            |   |         |        |       |      |           |          |        |        |  |
|             | VOTEVETS  |   |            |                            |   |         |        |       |      |           |          |        |        |  |
| _           | Full Name (Last, First, Middle Initial)   |   |            |                            |   |         |        |       |      |           |          |        |        |  |
| Α.          | ADP   |   |            |                            | 1                                       | Date of | Disl   | burse | mer  | nt        |          |        |        |  |
|             | Mailing Address 99 Jefferson Rd, Mail Stop 220  |   |            |                            |   | 01      | /      | 2     |      | / Y       | 2014     | Y      |        |  |
|             | City  | State Zip Code                                    |            |                            |   |         |        |       |      |           |          |        |        |  |
|             | Parsippany  | NJ 07054  |            |                            |   | Trans   | actio  | on ID | : D  | 585903    |          |        |        |  |
|             | Purpose of Disbursement Payroll Fees  |   | _          | -                          | ,                                       | Amount  | t of E | Each  | Disk | ourseme   | ent this | Perio  | od     |  |
|             | Candidate Name  |   | Cate       | gory/                      | П                                       | _       |        | _     | -    |           |          | . 50   | $\neg$ |  |
|             |   |   | Ту         |                            |   |         | _      |       | _    | 7         | 3.       | 2.50   |        |  |
|             | Office Sought: House Disbursen  |   |            |                            |   |         |        |       |      |           |          |        |        |  |
|             |   | Primary General Other (specify) ▼                 |            |                            |   |         |        |       |      |           |          |        |        |  |
|             | State: District:  | Officer (specify)                                 |            |                            |   |         |        |       |      |           |          |        |        |  |
| _           | Full Name (Last, First, Middle Initial)   |   |            |                            |   |         |        |       |      |           |          |        |        |  |
| В.          | ADP   |   |            |                            |   | Date of | Disl   |       |      |           |          |        |        |  |
|             | Mailing Address 99 Jefferson Rd, Mail Stop 220  |   |            |                            |   | 01      |        | 2     |      |           | 2014     | Y      |        |  |
|             | City  | State Zip Code                                    |            |                            |   |         |        |       |      |           |          |        |        |  |
|             | Parsippany  | NJ 07054  |            |                            |   | Trans   | actio  | on ID | : D  | 585904    |          |        |        |  |
|             | Purpose of Disbursement Payroll Fees  |   |            | 7                          | Amount of Each Disbursement this Period |         |        |       |      |           |          |        |        |  |
|             | Candidate Name  |   | Cata       | ~~"                        | lí                                      | unoun   | . 0    |       | D101 | 701001110 |          | . 0110 |        |  |
|             |   |   | Cate<br>Ty |                            |   |         |        | ,     |      |           | 7        | 4.17   |        |  |
|             | Office Sought: House Disbursen  | nent For:   |            |                            |   |         |        |       |      |           |          |        |        |  |
|             |   | Primary General                                   |            |                            |   |         |        |       |      |           |          |        |        |  |
|             | President State: District:  | Other (specify) ▼                                 |            |                            |   |         |        |       |      |           |          |        |        |  |
| _           | Full Name (Last, First, Middle Initial)   |   |            |                            |   |         |        |       |      |           |          |        |        |  |
| C.          | ADP   |   |            |                            | 1                                       | Date of | Disl   | burse | mer  | nt        |          |        |        |  |
|             |   |   |            |                            | 4 1                                     | M = M   | /      | D     | D    | / Y       | Y Y      | Υ      |        |  |
|             | Mailing Address 99 Jefferson Rd, Mail Stop 220  |   |            |                            |   | 02      |        | 07    | 7    | L         | 2014     | Ш      |        |  |
|             |   | State Zip Code                                    |            |                            |   | Trans   | actio  | on ID | : D! | 585911    |          |        |        |  |
|             | Parsippany Purpose of Disbursement  | NJ 07054  |            |                            | _                                       |         |        |       |      |           |          |        |        |  |
|             | Payroll Fees  |   | Г.         |                            |   | ∧ mount | of E   | Each  | Dick | ourseme   | nt thic  | Dorio  | vd.    |  |
|             | Candidate Name  |   | Cate       |                            | ľ                                       | Amount  | OIL    | Lacii | DISI | Jurseme   |          | 1.17   |        |  |
|             | Office Sought: House Disbursen  | nent For:   |            |                            | ┪                                       |         |        | 7     |      | - 7       |          |        |        |  |
|             |   | Primary General                                   |            |                            |   |         |        |       |      |           |          |        |        |  |
|             |   | Other (specify) ▼                                 |            |                            |   |         |        |       |      |           |          |        |        |  |
| _           | State: District:  |   |            |                            |   |         |        |       |      |           |          |        |        |  |
| 5           | SUBTOTAL of Disbursements This Page (optional)  |   |            | ▶                          |   |         |        |       | Ξ    | 7         | 180      | ).84   |        |  |
| Γ,          | OTAL This Period (last page this line number only)  |   |            |                            |   |         |        |       |      |           |          |        |        |  |
| ι'          | This i ones (last page this line number only)   |   |            |                            |   |         |        |       |      | 7         |          |        | _      |  |

| Use separate schedule for each category of the Detailed Summary Pagents may not be sold or | e   X 21b 27  | 22 23 24 25 26 28a 28b 28c 29 36   |
|--|---|--|
| nts may not be sold or   |   |  |
| and address of any no  |   | on for the purpose of soliciting contributions solicit contributions from such committee.  |
| and database of any po   |   | The second secon |
|  |   | Date of Disbursement   |
|  |   | 02 21 2014   |
| ate Zip Code<br>NJ 07054   |   | Transaction ID : D585913   |
|  |   | Amount of Each Disbursement this Period  |
| ent For:   | Category/<br>Type   | 74.17  |
|  | 1   |  |
|  |   |  |
|  |   | Date of Disbursement   |
|  |   | 03 07 2014   |
| ate Zip Code<br>IJ 07054   |   | Transaction ID : D585919   |
|  |   | Amount of Each Disbursement this Period  |
|  | Category/<br>Type   | 74.17  |
| ent For: rimary General ther (specify)   | I   |  |
|  |   |  |
|  |   | Date of Disbursement   |
|  |   | 03 21 2014   |
| ate Zip Code<br>IJ 07054   |   | Transaction ID: D585921  |
|  | Category/   | Amount of Each Disbursement this Period 74.17  |
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| J street street  | nt For: rimary General ther (specify)   atte Zip Code J 07054 | Category/ Type  Int For:  rimary General ther (specify)   Category/ Type  Category/ Type  Type  Category/ Type   |

| S  | CHEDULE B (FEC Form 3X)   |                     | FOR LINE NUMBER: PAGE 22 OF 34       |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
|----|---|---------------------|--------------------------------------|-------|---------------|----------|---|-------|--------|-----|--------|----------|------|-----|--|--|--|
| IT | EMIZED DISBURSEMENTS  |                     | arate schedule(s)<br>category of the | )   ( |               | -        | only one)                               |       |        |     |        |          |      |     |  |  |  |
|    |   |                     | Summary Page                         |       | ×             | 21b      | 22                                      |       | 23     |     | 24     | 25       |      | 26  |  |  |  |
|    |   |                     |                                      |       |               | 27       | 28a                                     |       | 28b    |     | 28c    | 29       |      | 30b |  |  |  |
|    | ny information copied from such Reports and Statem for commercial purposes, other than using the name |                     |                                      |       |               |          |   |       |        |     |        |          |      | 3   |  |  |  |
|    | NAME OF COMMITTEE (In Full)   |                     |                                      |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
|    | VOTEVETS  |                     |                                      |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
| _  | Full Name (Last, First, Middle Initial)   |                     |                                      |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
| Α. | Eric Schmeltzer   |                     |                                      |       |               |          | Date of                                 |       | sburse |     |        | YY       | Y    | 1   |  |  |  |
|    | Mailing Address 75 Sutton St  |                     |                                      |       |               |          | 01                                      |       | 1      | 4   | L      | 2014     |      |     |  |  |  |
|    | # 1<br>City   | State               | Zip Code                             |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
|    | Brooklyn  | NY                  | 11222-4403                           |       |               |          | Tran                                    | sact  | ion ID | : D | 587164 |          |      |     |  |  |  |
|    | Purpose of Disbursement<br>Communications Services  |                     |                                      |       | -             | ╗        | Amour                                   | nt of | Fach   | Dis | bursem | ent this | Peri | od  |  |  |  |
|    | Candidate Name  |                     |                                      | Co    | togor         |          |   |       |        |     |        |          |      |     |  |  |  |
|    |   |                     |                                      |       | tegor<br>Type | y/       |   |       | 7      | _   |        | 37       | 5.00 |     |  |  |  |
|    | Office Sought: House Disbursen  |                     |                                      |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
|    |   | Primary Other (spec | General                              |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
|    | State: District:  | Other (spec         | city) $\blacktriangledown$           |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
| _  | Full Name (Last, First, Middle Initial)   |                     |                                      |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
| В. | •   |                     |                                      |       |               |          | Date of                                 |       |        |     |        |          |      |     |  |  |  |
|    | Mailing Address 75 Sutton St # 1  |                     |                                      |       |               |          | 01                                      | /     |        | 80  | / Y    | 2014     | Y    |     |  |  |  |
|    | Brooklyn  | State<br>NY         | Zip Code<br>11222-4403               |       |               |          | Tran                                    | sact  | ion ID | : D | 587166 |          |      |     |  |  |  |
|    | Purpose of Disbursement<br>Communications Services  |                     |                                      | Т     |               |          | Amount of Each Disbursement this Period |       |        |     |        |          |      |     |  |  |  |
|    | Candidate Name  |                     |                                      |       | tegor<br>Type | y/       | 375.0                                   |       |        |     |        |          |      |     |  |  |  |
|    | Office Sought: House Disbursen  | nent For:           |                                      |       | туре          |          |   |       | ,      |     | 7      |          |      |     |  |  |  |
|    | Senate  | Primary             | General                              |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
|    | President State: District:  | Other (spec         | cify) ▼                              |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
| _  | Full Name (Last, First, Middle Initial)   |                     |                                      |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
| C. | Eric Schmeltzer   |                     |                                      |       |               |          | Date of                                 |       | sburse |     |        | YY       | V    |     |  |  |  |
|    | Mailing Address 75 Sutton St # 1  |                     |                                      |       |               |          | 02                                      |       |        | 3   | /      | 2014     |      |     |  |  |  |
|    | City  | State               | Zip Code                             |       |               |          | Tran                                    | sact  | ion ID | : D | 587168 |          |      |     |  |  |  |
|    | Brooklyn Purpose of Disbursement  | NY                  | 11222-4403                           |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
|    | Communications Services   |                     |                                      | П.    |               | ш        | Amour                                   | nt of | Each   | Dis | bursem | ent this | Peri | od  |  |  |  |
|    | Candidate Name  |                     |                                      |       | tegor<br>Type | y/       |   |       |        |     |        | 37       | 5.00 |     |  |  |  |
|    | Office Sought: House Disbursen  | nent For:           | I                                    |       |               |          |   |       | 7      |     | 7      |          |      |     |  |  |  |
|    |   | Primary             | General                              |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
|    |   | Other (spe          | cify) 🔻                              |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
|    | State: District:  |                     |                                      |       |               |          |   |       |        |     |        |          |      |     |  |  |  |
| 8  | SUBTOTAL of Disbursements This Page (optional)  |                     |                                      |       |               | <b>•</b> |   | Ξ     | ,      |     | -,     | 112      | 5.00 |     |  |  |  |
| Т  | OTAL This Period (last page this line number only)  |                     |                                      |       |               | <b>•</b> |   | I     | ,      |     | - 7    |          |      |     |  |  |  |

| S           | CHEDULE B (FEC Form 3X)   |            |                                   | FOR LINE          | NE NUMBER: PAGE 23 OF 34 |           |             |          |          |  |  |  |  |  |
|-------------|---|------------|-----------------------------------|-------------------|--------------------------|-----------|-------------|----------|----------|--|--|--|--|--|
| IT          | EMIZED DISBURSEMENTS  |            | arate schedule(s) category of the | (check only       | only one)                |           |             |          |          |  |  |  |  |  |
|             |   |            | Summary Page                      | X 21b             | 22                       | 23        | 24          | 25       | 26       |  |  |  |  |  |
| _           |   |            |                                   | 27                | 28a                      | 28b       | 28c         | 29       | 30b      |  |  |  |  |  |
|             | ny information copied from such Reports and Staten<br>for commercial purposes, other than using the nam |            |                                   |                   |                          |           |             |          |          |  |  |  |  |  |
| 7           | NAME OF COMMITTEE (In Full)   |            |                                   |                   | 220 001                  |           |             |          |          |  |  |  |  |  |
| $  \rangle$ | VOTEVETS  |            |                                   |                   |                          |           |             |          |          |  |  |  |  |  |
|             | VOTEVETO  |            |                                   |                   |                          |           |             |          |          |  |  |  |  |  |
| _           | Full Name (Last, First, Middle Initial)   |            |                                   |                   |                          |           |             |          |          |  |  |  |  |  |
| Α.          | Eric Schmeltzer   |            |                                   |                   | Date of                  | Disburse  | ement       |          |          |  |  |  |  |  |
|             | Mailing Address 75 Sutton St  |            |                                   |                   | M M M                    | / D 2     |             | 2014     | Y        |  |  |  |  |  |
|             | #1  |            |                                   |                   | 02                       |           | /           | 014      |          |  |  |  |  |  |
|             |   | State      | Zip Code                          |                   | Tuono                    | ID        | - DE07470   |          |          |  |  |  |  |  |
|             | Brooklyn  | NY         | 11222-4403                        |                   | irans                    | action iD | : D587170   |          |          |  |  |  |  |  |
|             | Purpose of Disbursement<br>Communications Services  |            |                                   |                   | Δ                        |           | Diahaaaaa   |          | اد ماد د |  |  |  |  |  |
|             | Candidate Name  |            |                                   |                   | Amoun                    | of Each   | Disbursemen | t this P | reriod   |  |  |  |  |  |
|             | Candidate Name  |            |                                   | Category/<br>Type |                          |           |             | 375.     | .00      |  |  |  |  |  |
|             | Office Sought: House Disbursen  | nent For:  |                                   | Турс              |                          | ,         | ,           |          |          |  |  |  |  |  |
|             |   | Primary    | General                           |                   |                          |           |             |          |          |  |  |  |  |  |
|             | President   | Other (spe | cify) ▼                           |                   |                          |           |             |          |          |  |  |  |  |  |
| _           | State: District:  |            |                                   |                   |                          |           |             |          |          |  |  |  |  |  |
| В.          | Full Name (Last, First, Middle Initial)   |            |                                   |                   | Date of                  | Disburse  | ment        |          |          |  |  |  |  |  |
| υ.          | Eric Schmeltzer   |            |                                   |                   | M M                      | / D       | _           | / Y      | V        |  |  |  |  |  |
|             | Mailing Address 75 Sutton St  |            |                                   |                   | 03                       |           |             | 2014     | 1        |  |  |  |  |  |
|             | #1  |            |                                   |                   |                          |           |             |          |          |  |  |  |  |  |
|             | •   | State      | Zip Code                          |                   | Trans                    | action ID | : D587171   |          |          |  |  |  |  |  |
|             | Brooklyn Purpose of Disbursement  | NY         | 11222-4403                        |                   |                          |           |             |          |          |  |  |  |  |  |
|             | Communications Services   |            |                                   |                   | Amount                   | t of Each | Disbursemen | t this P | eriod    |  |  |  |  |  |
|             | Candidate Name  |            |                                   | Category/         |                          |           |             |          |          |  |  |  |  |  |
|             |   |            |                                   | Type              |                          | -,        |             | 375.     | .00      |  |  |  |  |  |
|             | Office Sought: House Disbursen  |            |                                   |                   |                          |           |             |          |          |  |  |  |  |  |
|             |   | Primary    | General                           |                   |                          |           |             |          |          |  |  |  |  |  |
|             | State: District:  | Other (spe | City) $\blacktriangledown$        |                   |                          |           |             |          |          |  |  |  |  |  |
| _           | Full Name (Last, First, Middle Initial)   |            |                                   |                   |                          |           |             |          |          |  |  |  |  |  |
| C.          | Eric Schmeltzer   |            |                                   |                   | Date of                  | Disburse  | ment        |          |          |  |  |  |  |  |
|             |   |            |                                   |                   | M M                      | / D       | D / Y       | Y        | Υ        |  |  |  |  |  |
|             | Mailing Address 75 Sutton St  |            |                                   |                   | 03                       | 2         | 8 2         | 014      |          |  |  |  |  |  |
|             | # 1<br>City   | State      | Zip Code                          |                   |                          |           |             |          |          |  |  |  |  |  |
|             |   | NY         | 11222-4403                        |                   | Trans                    | action ID | : D587173   |          |          |  |  |  |  |  |
|             | Purpose of Disbursement   |            |                                   |                   |                          |           |             |          |          |  |  |  |  |  |
|             | Communications Services   |            |                                   |                   | Amount                   | of Each   | Disbursemen | t this P | eriod    |  |  |  |  |  |
|             | Candidate Name  |            |                                   | Category/         |                          |           |             | 375.     | .00      |  |  |  |  |  |
|             | Office Sought: House Disbursen  | nent For:  |                                   | Туре              |                          | - 7       |             |          |          |  |  |  |  |  |
|             |   | Primary    | General                           |                   |                          |           |             |          |          |  |  |  |  |  |
|             | President   | Other (spe |                                   |                   |                          |           |             |          |          |  |  |  |  |  |
|             | State: District:  |            |                                   |                   |                          |           |             |          |          |  |  |  |  |  |
|             |   |            |                                   |                   |                          |           |             |          | -        |  |  |  |  |  |
| 5           | SUBTOTAL of Disbursements This Page (optional)  |            |                                   | ·····             |                          | -         |             | 1125.    | 00       |  |  |  |  |  |
| L           |   |            |                                   |                   |                          |           |             |          | - 7      |  |  |  |  |  |
| 1           | <b>'OTAL</b> This Period (last page this line number only)  |            |                                   | ••••••            |                          | -         |             |          |          |  |  |  |  |  |

| S           | CHEDULE B (FEC Form 3X)   | FOR LINE   |                            |     |               |      |  | LINE NUMBER: PAGE 24 OF 34 |      |         |            |       |            |         |       |        |  |  |  |  |  |
|-------------|---|------------|----------------------------|-----|---------------|------|--|----------------------------|------|---------|------------|-------|------------|---------|-------|--------|--|--|--|--|--|
| IT          | EMIZED DISBURSEMENTS  | Use sepa   | (chec                      |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
|             |   |            | Summary Page               |     | ×             | 21b  |  | 22                         |      | 23      |            | 24    |            | 25      |       | 26     |  |  |  |  |  |
| _           |   |            |                            |     |               | 27   |  | 28a                        |      | 28b     |            | 28    |            | 29      | _     | 30b    |  |  |  |  |  |
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| $\setminus$ | NAME OF COMMITTEE (In Full)   |            |                            |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
| $ \rangle$  | VOTEVETS  |            |                            |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
|             | Full Name (Last, First, Middle Initial)   |            |                            |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
| Α.          | Evans & Katz LLC  |            |                            |     |               |      | Da                                     |                            |      | sburse  |            | ent   |            |         |       |        |  |  |  |  |  |
|             | Mailing Address 1831 Bay Street, SE   |            |                            | IVI | 01            |      | C                                      | )5                         | ,    |         | 2014       | - Y   |            |         |       |        |  |  |  |  |  |
|             | City  | State      | Zip Code                   |     |               |      |  |                            | 4    | : ID    |            | \F0F  | 007        |         |       |        |  |  |  |  |  |
|             | Washington  | DC         | 20003                      |     |               |      |  | rans                       | sact | ion ID  | ט: ט       | )585  | <i>301</i> |         |       |        |  |  |  |  |  |
|             | Purpose of Disbursement<br>Accounting Services  |            |                            | Г   | -             |      | Am                                     | oun                        | t of | Each    | Dis        | sburs | semer      | nt this | Per   | riod   |  |  |  |  |  |
|             | Candidate Name  |            |                            | C   | atego         |      | Г                                      |                            |      | -       |            |       |            | 12      | 6.00  | 0      |  |  |  |  |  |
|             | Office Sought: House Disbursen  | nent For:  |                            |     | Туре          |      |  |                            |      | ,       |            | ,     |            |         |       | _      |  |  |  |  |  |
|             |   | Primary    | General                    |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
|             | President   | Other (spe | cify) 🔻                    |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
|             | State: District:  |            |                            |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
|             | Full Name (Last, First, Middle Initial)   |            |                            |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
| В.          | Evans & Katz LLC  |            |                            |     |               |      | Da                                     | te o                       | f Di | sburse  | eme        | ent   |            |         |       |        |  |  |  |  |  |
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|             | Mailing Address 1831 Bay Street, SE   |            |                            |     |               |      | _                                      | 03                         | 1    |         | ) (        |       |            | 2014    |       |        |  |  |  |  |  |
|             | ,   | State      | Zip Code                   | т   | rans          | sact | ion IE                                 | ) : C                      | )585 | 925     |            |       |            |         |       |        |  |  |  |  |  |
|             | Washington Purpose of Disbursement  | DC         | 20003                      |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
|             | Accounting Services   |            |                            | П   |               |      | Amount of Each Disbursement this Perio |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
|             | Candidate Name  |            |                            |     | atego         | rv/  | ·                                      |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
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|             |   | Primary    | General                    |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
|             | President State: District:  | Other (spe | city) $\blacktriangledown$ |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
| _           | Full Name (Last, First, Middle Initial)   |            |                            |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
| C.          | Evans & Katz LLC  |            |                            |     |               |      | Da                                     | te o                       | f Di | sburse  | eme        | ent   |            |         |       |        |  |  |  |  |  |
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|             | Mailing Address 1831 Bay Street, SE   |            |                            |     |               |      | L                                      | 02                         | Ł    | C       | )3         |       | 2          | 2014    | _     | _      |  |  |  |  |  |
|             | City  | State      | Zip Code                   |     |               |      |  |                            |      | ion IC  | \ . r      | SEGE  | 046        |         |       |        |  |  |  |  |  |
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|             | Purpose of Disbursement<br>Accounting Services  |            |                            | Г   | -             |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
|             | Candidate Name  |            |                            | L   | -             |      | Am                                     | oun                        | t of | Each    | Dis        | sburs | semer      | nt this | Per   | riod   |  |  |  |  |  |
|             | Candidate Name  |            |                            | C   | atego<br>Type |      |  |                            |      |         |            |       |            | 8       | 4.60  | 0      |  |  |  |  |  |
|             | Office Sought: House Disbursen  | nent For:  |                            |     | . , p c       |      |  |                            |      | 7       |            | ,     | _          |         |       | _      |  |  |  |  |  |
|             |   | Primary    | General                    |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
|             | President   | Other (spe | cify) 🔻                    |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
|             | State: District:  |            |                            |     |               |      |  |                            |      |         |            |       |            |         |       |        |  |  |  |  |  |
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| SCHEDULE B (FEC Form 3   |  | FOR LINE          | R LINE NUMBER: PAGE 25 OF 34           |                        |  |  |  |  |  |  |  |  |  |  |
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| ITEMIZED DISBURSEMENTS   | Use separate schedule for each category of the | L' (CITCOR OTT)   | ` — ′                                  |                        |  |  |  |  |  |  |  |  |  |  |
|  | Detailed Summary Pa                            | ae   🛆 210        | 22 23                                  | 24 25 26               |  |  |  |  |  |  |  |  |  |  |
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| NAME OF COMMITTEE (In Full)  |  |                   |  |                        |  |  |  |  |  |  |  |  |  |  |
| → VOTEVETS   |  |                   |  |                        |  |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  |  |                   | Data of Diskumanus                     |                        |  |  |  |  |  |  |  |  |  |  |
| A. Les MacDonald   |  |                   | Date of Disbursem                      | ent                    |  |  |  |  |  |  |  |  |  |  |
| Mailing Address 1111 Locust Street   |  |                   | 01 14                                  | 2014                   |  |  |  |  |  |  |  |  |  |  |
| City   | State Zip Code                                 |                   | Transaction ID : I                     | DE0717E                |  |  |  |  |  |  |  |  |  |  |
| Philadelphia   | PA 19107                                       |                   | Transaction ID:                        | D367173                |  |  |  |  |  |  |  |  |  |  |
| Purpose of Disbursement<br>Strategic Management Services   |  |                   | Amount of Each Di                      | sbursement this Period |  |  |  |  |  |  |  |  |  |  |
| Candidate Name   |  | Category/<br>Type |  | 325.00                 |  |  |  |  |  |  |  |  |  |  |
| Office Sought: House   | Disbursement For:                              | .,,,,,            |  |                        |  |  |  |  |  |  |  |  |  |  |
| Senate   | Primary Gener                                  | al                |  |                        |  |  |  |  |  |  |  |  |  |  |
| President  | Other (specify) ▼                              |                   |  |                        |  |  |  |  |  |  |  |  |  |  |
| State: District:   |  |                   |  |                        |  |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  |  |                   | Data of Diahumaan                      |                        |  |  |  |  |  |  |  |  |  |  |
| B. Les MacDonald   |  |                   | Date of Disbursem                      |                        |  |  |  |  |  |  |  |  |  |  |
| Mailing Address 1111 Locust Street   |  |                   | 01 30                                  | 2014                   |  |  |  |  |  |  |  |  |  |  |
| City   | State Zip Code<br>PA 19107                     |                   | Transaction ID :                       | D587176                |  |  |  |  |  |  |  |  |  |  |
| Philadelphia Purpose of Disbursement   | FA 19107                                       |                   |  |                        |  |  |  |  |  |  |  |  |  |  |
| Strategic Management Services  |  |                   | Amount of Each Disbursement this Perio |                        |  |  |  |  |  |  |  |  |  |  |
| Candidate Name   |  | Category/<br>Type |  | 325.00                 |  |  |  |  |  |  |  |  |  |  |
| Office Sought: House   | Disbursement For:                              | Туре              |  |                        |  |  |  |  |  |  |  |  |  |  |
| Senate   | Primary General                                | al                |  |                        |  |  |  |  |  |  |  |  |  |  |
| President  | Other (specify) ▼                              |                   |  |                        |  |  |  |  |  |  |  |  |  |  |
| State: District:   |  |                   |  |                        |  |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  |  |                   |  |                        |  |  |  |  |  |  |  |  |  |  |
| C. Les MacDonald   |  |                   | Date of Disbursem                      | _                      |  |  |  |  |  |  |  |  |  |  |
| Mailing Address 1111 Locust Street   |  |                   | 02 13                                  | 2014                   |  |  |  |  |  |  |  |  |  |  |
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| Philadelphia Purpose of Disbursement   | PA 19107                                       |                   |  |                        |  |  |  |  |  |  |  |  |  |  |
| Strategic Management Services  |  |                   | Amount of Fools Di                     | sbursement this Period |  |  |  |  |  |  |  |  |  |  |
| Candidate Name   |  | Category/<br>Type | Amount of Each Di                      | 325.00                 |  |  |  |  |  |  |  |  |  |  |
| Office Sought: House   | Disbursement For:                              | 1,750             |  | 7                      |  |  |  |  |  |  |  |  |  |  |
| Senate   | Primary Gener                                  | al                |  |                        |  |  |  |  |  |  |  |  |  |  |
| President  | Other (specify) ▼                              |                   |  |                        |  |  |  |  |  |  |  |  |  |  |
| State: District:   |  |                   |  |                        |  |  |  |  |  |  |  |  |  |  |
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| TOTAL This Period (last page this line nu  | mber only)                                     | ·····             |  | 7                      |  |  |  |  |  |  |  |  |  |  |

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| or for commercial purposes, other than using the name and address of any political committee to solicit contribu  NAME OF COMMITTEE (In Full)  VOTEVETS  Full Name (Last, First, Middle Initial)  A. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code PA 19107  Purpose of Disbursement Strateglic Management Services  Candidate Name  Office Sought: House Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  B. Les MacDonald  Mailing Address 1111 Locust Street  City Philadelphia PA 19107  Purpose of Disbursement For: Other (specify) ▼  Transactic  City State Zip Code PA 19107  Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: House PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: House Primary General Other (specify) ▼  Transactic  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Transactic  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Transactic Management Services  Candidate Name  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Transactic Management Services  City Philadelphia PA 19107  Philadelphia PA 19107  Primary General Other (specify) ▼  Transactic Management Services Management Services  Amount of E  Transactic Management Services  City PA 19107  Philadelphia PA 19107  Particular Code P | 23 24 25 2<br>28b 28c 29 3    |  |  |  |  |  |  |  |  |  |
| NAME OF COMMITTEE (In Full)  VOTEVETS  Full Name (Last, First, Middle Initial)  A. Les MacDonald  Mailing Address 1111 Locust Street  City Philadelphia Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: Full Name (Last, First, Middle Initial)  B. Les MacDonald  Mailing Address 1111 Locust Street  City Philadelphia Purpose of Disbursement Strategic Management Services  Candidate Name  Disbursement For: Senate Primary Other (specify)  Other (specify)  Transactic  Date of Dist  Mailing Address 1111 Locust Street  City Philadelphia Purpose of Disbursement Strategic Management Services  Candidate Name  Disbursement For: Senate Primary Office Sought: Other (specify)  Transactic  Amount of E  Category/ Type  Office Sought: Other (specify)  Transactic  Amount of E  Category/ Type  Transactic  Amount of E  Category/ Type  Transactic  Amount of E  Category/ Type  Office Sought: District:  Full Name (Last, First, Middle Initial)  C. Les MacDonald  Mailing Address 1111 Locust Street  City Primary Other (specify)  Transactic  Amount of E  Amount of E  Transactic  Transactic  Amount of E  Transactic  Amount of E  Transactic  Amount of E  Amount of E  Transactic  Amount of E  Transactic  Amount of E  |                               |  |  |  |  |  |  |  |  |  |
| A. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  B. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code PA 19107  Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Transactic Amount of E  Category/ Type  Office Sought: House Disbursement For: General Other (specify) ▼  Transactic Amount of E  Transactic Amount of E  Date of Disbursement Strategic Management Services  Candidate Name  Other (specify) ▼  Transactic Amount of E  | uons from such committee.     |  |  |  |  |  |  |  |  |  |
| Mailing Address 1111 Locust Street  City State Zip Code PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: House Senate Prisaident President State: District:  Full Name (Last, First, Middle Initial)  B. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code PA 19107  Philadelphia PA 19107  Office Sought: House Senate Primary General Other (specify) ▼  Transactic Other (specify) ▼  Transactic Other (specify) ▼  Transactic Other (specify) ▼  Date of Distrance Category/ Type  Office Sought: House Primary General Other (specify) ▼  Category/ Type  Office Sought: President Other (specify) ▼  Transactic Other (specify) ▼  Transactic Other (specify) ▼  Transactic Other (specify) ▼  Date of Distrance Category/ Type  Other (specify) ▼  Transactic Other (specify) ▼  Transactic Other (specify) ▼  Transactic Other (specify) ▼  Date of Distrance Other (specify) ▼  Transactic Other |                               |  |  |  |  |  |  |  |  |  |
| Mailing Address 1111 Locust Street  | oursement                     |  |  |  |  |  |  |  |  |  |
| Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  B. Les MacDonald  Mailling Address 1111 Locust Street  City President Primary General Other (specify) ▼  State Zip Code PA 19107  Transactic Amount of E  Category/ Type  Transactic Category/ Type  Transactic Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State Zip Code PA 19107  Transactic Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Ct. Les MacDonald  Mailling Address 1111 Locust Street  City State Zip Code PA 19107  Purpose of Disbursement Strategic Management Services  City State Zip Code PA 19107  Purpose of Disbursement Strategic Management Services  Category/ Type  Transactic Category/ Type  Amount of E  Transactic Category/ Type  Transactic Category/ Type  Amount of E  Transactic Category/ Type  Amount of E  Transactic Category/ Type  Transactic Category/ Type  Amount of E  Transactic Category/ Type  Trans |                               |  |  |  |  |  |  |  |  |  |
| Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District: Pull Name (Last, First, Middle Initial)  B. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: House Primary General Other (specify) ▼  Transactic Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District: Di | on ID : D587178               |  |  |  |  |  |  |  |  |  |
| Strategic Management Services  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District: Full Name (Last, First, Middle Initial)  B. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: House Primary General Other (specify) ▼  Transactic Amount of E  Amount of E  Amount of E  Amount of E  Category/ Type  Transactic Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District: Distric |                               |  |  |  |  |  |  |  |  |  |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)  B. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: House Disbursement For: Senate Primary General Primary General Other (specify) ▼  Office Sought: House Disbursement For: Senate Primary General President State: District:  Full Name (Last, First, Middle Initial)  C. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code Primary General Primary General Other (specify) ▼  Category/Type  Transactic District: Primary General Primary Gener | Each Disbursement this Period |  |  |  |  |  |  |  |  |  |
| Senate President District:  Full Name (Last, First, Middle Initial)  B. Les MacDonald  Mailing Address 1111 Locust Street  City Philadelphia Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: Primary Disbursement Strate: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: District:  Full Name (Last, First, Middle Initial)  C. Les MacDonald  Mailing Address 1111 Locust Street  City Philadelphia Paresident State: District:  Full Name (Last, First, Middle Initial)  C. Les MacDonald  Mailing Address 1111 Locust Street  City Philadelphia Paresident Strategic Management Services  Category/ Type  Transactic  Amount of E  Amount of E  Amount of E  Amount of E   | 325.00                        |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  B. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Office Sought: House Primary General Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  C. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  City State Zip Code Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Amount of E   |                               |  |  |  |  |  |  |  |  |  |
| B. Les MacDonald    Mailing Address 1111 Locust Street  |                               |  |  |  |  |  |  |  |  |  |
| City State Zip Code PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  C. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Amount of E  Transactic  Amount of E   | D D / Y Y Y Y                 |  |  |  |  |  |  |  |  |  |
| Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  C. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Amount of E  Transaction  Transaction  Amount of E  Amount of E  | 13 2014                       |  |  |  |  |  |  |  |  |  |
| Strategic Management Services  Candidate Name  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  C. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Amount of E  Transaction  Amount of E  | on ID : D587179               |  |  |  |  |  |  |  |  |  |
| Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  C. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Cardidate N | Each Disbursement this Period |  |  |  |  |  |  |  |  |  |
| Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name   | 325.00                        |  |  |  |  |  |  |  |  |  |
| C. Les MacDonald  Mailing Address 1111 Locust Street  City State Zip Code Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Amount of E   | Ź                             |  |  |  |  |  |  |  |  |  |
| Mailing Address 1111 Locust Street  City State Zip Code Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Amount of E   |                               |  |  |  |  |  |  |  |  |  |
| Philadelphia PA 19107  Purpose of Disbursement Strategic Management Services  Candidate Name  Amount of E   | 28 2014                       |  |  |  |  |  |  |  |  |  |
| Strategic Management Services  Candidate Name  Amount of E  | on ID : D587180               |  |  |  |  |  |  |  |  |  |
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| Office Sought:  Senate President  State:  Disbursement For: Primary Other (specify) ▼  State:   |                               |  |  |  |  |  |  |  |  |  |
| SUBTOTAL of Disbursements This Page (optional)  | 975.00                        |  |  |  |  |  |  |  |  |  |

| S           | CHEDULE B (FEC Form 3X)   |            |                  |    | FOR           | LINE NUMBER: PAGE 27 OF 34 |  |           |        |           |       |           |          |          |          |           |
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| IT          | EMIZED DISBURSEMENTS  | Use sepa   | (check only one) |    |               |                            |  |           |        |           |       |           |          |          |          |           |
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| $\setminus$ | NAME OF COMMITTEE (In Full)   |            |                  |    |               |                            |  |           |        |           |       |           |          |          |          |           |
| $ \rangle$  | VOTEVETS  |            |                  |    |               |                            |  |           |        |           |       |           |          |          |          |           |
|             | Full Name (Last, First, Middle Initial)   |            |                  |    |               |                            |  |           |        |           |       |           |          |          |          |           |
| Α.          | Peter Mellman   |            |                  |    |               |                            | D                                      | ate o     |        | sburse    |       |           | / I Y    | V        | V        |           |
|             | Mailing Address 4518 N Kerby Ave  |            |                  | 01 |               |                            | 4                                      |           | 20     |           |       |           |          |          |          |           |
|             | City 5  | Zip Code   |                  |    |               |                            | Trans                                  | eact      | ion ID | · D       | 58718 | 7         |          |          |          |           |
|             |   | OR         | 97217            |    |               |                            |  | IIaiis    | saci   | 1011 10   | · . D | 307 10    | ''       |          |          |           |
|             | Purpose of Disbursement<br>Operations Services  |            |                  |    |               |                            | Α                                      | moun      | nt of  | Each      | Dis   | bursei    | ment     | this I   | Peric    | od        |
|             | Candidate Name  |            |                  | С  | atego<br>Type |                            |  |           | T      |           |       |           |          | 375      | 5.00     | ٦         |
|             | Office Sought: House Disbursen  | nent For:  |                  |    | Турс          |                            |  |           |        | ,         |       | ,         |          |          |          |           |
|             | Senate  | Primary    | General          |    |               |                            |  |           |        |           |       |           |          |          |          |           |
|             |   | Other (spe | cify) ▼          |    |               |                            |  |           |        |           |       |           |          |          |          |           |
| _           | State: District:  |            |                  |    |               |                            |  |           |        |           |       |           |          |          |          |           |
| Б           | Full Name (Last, First, Middle Initial)   |            |                  |    |               |                            | _                                      |           | ( D:   | _1        |       | 1         |          |          |          |           |
| В.          | Peter Mellman   |            |                  |    |               |                            | ט                                      |           |        | sburse    |       |           |          |          |          |           |
|             | Mailing Address 4518 N Kerby Ave  |            |                  |    |               |                            |  | 01        | /      |           | 30    | / Y       | 20       | 14       | Y        |           |
|             |   | State      | Zip Code         |    | Trans         | sact                       | ion ID                                 | ) : D     | 58718  | 38        |       |           |          |          |          |           |
|             | Purpose of Disbursement   | OR         | 97217            |    |               |                            | _                                      |           |        |           |       |           |          |          |          |           |
|             | Operations Services   |            |                  |    |               |                            | Amount of Each Disbursement this Perio |           |        |           |       |           |          |          |          |           |
|             | Candidate Name  |            |                  | С  | atego<br>Type |                            |  |           | 375    | 5.00      | ٦     |           |          |          |          |           |
|             | Office Sought: House Disbursen  | nent For:  |                  |    | Турс          |                            |  |           |        | 7         |       | 7         |          |          |          |           |
|             |   | Primary    | General          |    |               |                            |  |           |        |           |       |           |          |          |          |           |
|             | President   | Other (spe | cify) ▼          |    |               |                            |  |           |        |           |       |           |          |          |          |           |
| _           | State: District:  |            |                  |    |               |                            |  |           |        |           |       |           |          |          |          |           |
| _           | Full Name (Last, First, Middle Initial)   |            |                  |    |               |                            | _                                      |           | ( D:   | _1        |       | 1         |          |          |          |           |
| C.          | Peter Mellman   |            |                  |    |               |                            |  |           |        | sburse    |       |           |          |          |          |           |
|             | Mailing Address 4518 N Kerby Ave  |            |                  |    |               |                            |  | м<br>02   | /      | 1         | 3     | / Y       | 20       |          | Υ        |           |
|             | City S  | State      | Zip Code         |    |               |                            |  | _         |        |           |       |           |          |          |          |           |
|             |   | OR         | 97217            |    |               |                            |  | Trans     | sact   | ion ID    | ) : D | 58718     | i9       |          |          |           |
|             | Purpose of Disbursement<br>Operations Services  |            |                  |    | -             | $\neg$                     |  |           |        |           |       |           |          |          |          |           |
|             | Candidate Name  |            |                  | L  |               |                            | Α                                      | mour      | nt of  | Each      | Dis   | burse     | ment     | this I   | Perio    | bd        |
|             | Candidate Name  |            |                  | С  | atego<br>Type |                            |  |           |        |           |       |           |          | 375      | .00      | П         |
|             | Office Sought: House Disbursen  | nent For:  |                  |    | 71            |                            |  |           | _      | 7         |       | ,         |          |          |          |           |
|             | Senate  | Primary    | General          |    |               |                            |  |           |        |           |       |           |          |          |          |           |
|             |   | Other (spe | cify) ▼          |    |               |                            |  |           |        |           |       |           |          |          |          |           |
|             | State: District:  |            |                  |    |               |                            |  |           |        |           |       |           |          |          |          |           |
| ,           | UBTOTAL of Disbursements This Page (optional)   |            |                  |    |               |                            | Г                                      |           |        |           |       |           |          | 1125     | .00      | $\neg$    |
| Ľ           | DETOTAL OF DISDUISEMENTS THIS FAGE (OPHONAL)  |            |                  |    |               | _                          | H                                      | ÷         | ÷      | 7         |       |           | <b>=</b> | -        | <b>=</b> | =         |
| Т           | OTAL This Period (last page this line number only)  |            |                  |    |               |                            |  |           |        | ,         |       |           |          |          |          |           |

| S        | CHEDULE B (FEC Form 3X)  |             | LINE NUMBER: PAGE 28 OF 34 |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
|----------|--|-------------|----------------------------|---|---------------|--------|-------------------------------------|-------|----------|--------|-----------|---------|----------|------|-----|--|
| IT       | EMIZED DISBURSEMENTS   | Use sepa    | (check only one)           |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
|          |  |             | Summary Page               |   | ×             | 21b    | 2:                                  | L     |          | 23     |           | 24      | 25       |      | 26  |  |
|          |  |             |                            |   |               | 27     |                                     | За    |          | 28b    | $\coprod$ | 28c     | 29       |      | 30b |  |
|          | ly information copied from such Reports and Staten<br>for commercial purposes, other than using the name |             |                            |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
|          | NAME OF COMMITTEE (In Full)  |             |                            |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
|          | VOTEVETS   |             |                            |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
|          | Full Name (Last, First, Middle Initial)  |             |                            |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
| Α.       | Peter Mellman  |             |                            |   |               |        |                                     | e of  | Disb     | ourse  |           |         | Y        | V    |     |  |
|          | Mailing Address 4518 N Kerby Ave   |             |                            |   |               | )2     |                                     | 2     | - 1      | L      | 2014      |         |          |      |     |  |
|          | City S   | Zip Code    |                            |   |               | Tr     | anca                                | ctio  | חו ח     | . D.   | 87190     |         |          |      |     |  |
|          |  | OR          | 97217                      |   |               |        |                                     | aiisa | Clio     | טו ווי | . Б       | 007 190 |          |      |     |  |
|          | Purpose of Disbursement<br>Operations Services   |             |                            | Г |               |        | Amo                                 | ount  | of E     | ach    | Dist      | ourseme | ent this | Peri | iod |  |
|          | Candidate Name   |             |                            | C | atego<br>Type |        |                                     |       |          |        | T         | 40      | 37       | 5.00 |     |  |
|          | Office Sought: House Disbursen   | nent For:   |                            |   | 71            |        |                                     |       | ,        |        |           |         |          |      |     |  |
|          | Senate   | Primary     | General                    |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
|          |  | Other (spe  | ecify) 🔻                   |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
| _        | State: District:   |             |                            |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
| R        | Full Name (Last, First, Middle Initial)  |             |                            |   |               |        | Dat                                 | a of  | Dich     | ourse  | mar       | n†      |          |      |     |  |
| υ.       | Peter Mellman  |             |                            |   |               |        |                                     |       | DISL     |        |           |         | Y        | V    |     |  |
|          | Mailing Address 4518 N Kerby Ave   |             |                            |   |               |        |                                     | 03    | <i>'</i> | 1:     | - 1       |         | 2014     | ,    |     |  |
|          |  | State<br>OR | Zip Code<br>97217          |   |               |        | Tr                                  | ansa  | ctio     | n ID   | : D!      | 587191  |          |      |     |  |
|          | Purpose of Disbursement  |             | 97217                      |   |               |        | _                                   |       |          |        |           |         |          |      |     |  |
|          | Operations Services  |             |                            |   |               |        | Amount of Each Disbursement this Pe |       |          |        |           |         |          |      |     |  |
|          | Candidate Name   |             |                            | C | atego<br>Type |        |                                     |       | 37       | 5.00   | )         |         |          |      |     |  |
|          | Office Sought: House Disbursen   | nent For:   |                            |   | .,,,,         |        |                                     |       |          |        |           |         |          |      |     |  |
|          | Senate   | Primary     | General                    |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
|          |  | Other (spe  | cify) 🔻                    |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
| _        | State: District:   |             |                            |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
| ^        | Full Name (Last, First, Middle Initial)  |             |                            |   |               |        | D - 4                               |       | D:-1-    |        |           |         |          |      |     |  |
| C.       | Peter Mellman  |             |                            |   |               |        |                                     |       | DISC     | ourse  |           |         |          |      |     |  |
|          | Mailing Address 4518 N Kerby Ave   |             |                            |   |               |        |                                     | )3    | /        | 28     | _         | / Y     | 2014     | Y    |     |  |
|          | City   | State       | Zip Code                   |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
|          |  | OR          | 97217                      |   |               |        | Tr                                  | ansa  | ctio     | n ID   | : D5      | 587192  |          |      |     |  |
|          | Purpose of Disbursement<br>Operations Services   |             |                            |   | -             | $\neg$ |                                     |       |          |        |           |         |          |      |     |  |
|          | •  |             |                            | L |               |        | Amo                                 | ount  | of E     | ach    | Disk      | ourseme | ent this | Peri | od  |  |
|          | Candidate Name   |             |                            | C | atego<br>Type |        |                                     |       |          |        |           |         | 37       | 5.00 |     |  |
|          | Office Sought: House Disbursen   | nent For:   |                            |   |               |        |                                     |       | - ,      |        | _         | 7       |          |      |     |  |
|          | Senate   | Primary     | General                    |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
|          |  | Other (spe  | cify) 🔻                    |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
|          | State: District:   |             |                            |   |               |        |                                     |       |          |        |           |         |          |      |     |  |
| 8        | UBTOTAL of Disbursements This Page (optional)  |             |                            |   |               |        |                                     |       | -        |        | ī         | (8)     | 112      | 5.00 | П   |  |
| $\vdash$ | · · · · /  |             |                            |   |               |        |                                     |       | ,        |        | =         | 7       |          |      | 一   |  |
| т        | OTAL This Period (last page this line number only)   |             |                            |   |               |        |                                     |       |          |        |           | 7       |          |      |     |  |

## 17

| SCHEDULE B (FEC Form 3X)   |  | FOR LINE              | NUMBER:           | PAGE 29 OF 34           |
|--|--|-----------------------|-------------------|-------------------------|
| ITEMIZED DISBURSEMENTS   | Use separate schedule(s for each category of the | c(s) (check only one) |                   |                         |
|  | Detailed Summary Page                            | X 21b 27              | 22 23 28b         | 24 25 26<br>28c 29 30b  |
| Any information copied from such Reports and Stater or for commercial purposes, other than using the nar |  |                       |                   |                         |
| NAME OF COMMITTEE (In Full)  | and dadrood of diffy point                       |                       | 20 3011           | z out committee.        |
| VOTEVETS   |  |                       |                   |                         |
| Full Name (Last, First, Middle Initial)  |  |                       |                   |                         |
| A. Jonathan Soltz  |  |                       | Date of Disbursem |                         |
| Mailing Address 5290 Duke Street   |  |                       | 01 14             | 2014                    |
| City   | State Zip Code                                   |                       | Towns of the ID   | DF07404                 |
| Alexandria   | VA 22304   |                       | Transaction ID :  | D587181                 |
| Purpose of Disbursement Strategic Management Services  |  |                       | Amount of Each D  | isbursement this Period |
| Candidate Name   |  | Category/<br>Type     |                   | 262.50                  |
| Office Sought: House Disburser Senate  | ment For:  Primary General                       |                       |                   |                         |
| President  | Other (specify)                                  |                       |                   |                         |
| State: District:   |  |                       |                   |                         |
| Full Name (Last, First, Middle Initial)  |  |                       |                   |                         |
| B. Jonathan Soltz  |  |                       | Date of Disbursem | ent                     |
| Mailing Address 5290 Duke Street   |  |                       | 01 30             | 2014                    |
| City   | State Zip Code                                   |                       | Transaction ID :  | DE07402                 |
| Alexandria   | VA 22304   |                       | Transaction ID:   | DJ01 102                |
| Purpose of Disbursement Strategic Management Services  |  |                       | Amount of Each D  | isbursement this Period |
| Candidate Name   |  | Category/<br>Type     |                   | 262.50                  |
| Office Sought: House Disburser   | ment For:  | , ,,                  |                   |                         |
| Senate   | Primary General                                  |                       |                   |                         |
| State: President District:   | Other (specify) ▼                                |                       |                   |                         |
| Full Name (Last, First, Middle Initial)  |  |                       | Data of Dishams   | ont                     |
| C. Jonathan Soltz  |  |                       | Date of Disbursem |                         |
| Mailing Address 5290 Duke Street   |  |                       | 02 13             | 2014                    |
| City   | State Zip Code                                   |                       | Transaction ID :  | D507102                 |
| Alexandria   | VA 22304   |                       | Transaction ID :  | D301 103                |
| Purpose of Disbursement Strategic Management Services  |  |                       | Amount of Each D  | isbursement this Period |
| Candidate Name   |  | Category/<br>Type     |                   | 262.50                  |
| Office Sought: House Disburser   | ment For:  | 1 .75-                |                   |                         |
| Senate   | Primary General                                  |                       |                   |                         |
| President  | Other (specify) ▼                                |                       |                   |                         |
| State: District:   |  |                       |                   |                         |
| SUBTOTAL of Disbursements This Page (optional)   |  |                       |                   | 787.50                  |
| TOTAL This Period (last page this line number only)  | )  |                       |                   |                         |

| SCHEDULE B (FEC Form 3X)   |   | FOR LINE          | NUMBER:      | PAGE 30 OF 34                        |
|--|---|-------------------|--------------|--------------------------------------|
| ITEMIZED DISBURSEMENTS   | Use separate schedule(s) for each category of the | (check only one)  |              |                                      |
|  | Detailed Summary Page                             | X 21b             |              | 23 24 25 26                          |
| r  |   | 27                |              | 28b 28c 29 30b                       |
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| NAME OF COMMITTEE (In Full)  |   |                   |              |                                      |
| VOTEVETS   |   |                   |              |                                      |
| Full Name (Last, First, Middle Initial)  |   |                   |              |                                      |
| A. Jonathan Soltz  |   |                   | Date of Dis  | bursement / Y Y Y Y Y Y              |
| Mailing Address 5290 Duke Street   |   |                   | 02           | 272014                               |
| City   | State Zip Code                                    |                   | Transaction  | on ID : D587184                      |
| Alexandria   | VA 22304  |                   | Transactio   | טו ווע : טססיז וסט                   |
| Purpose of Disbursement Strategic Management Services  |   |                   | Amount of E  | Each Disbursement this Period        |
| Candidate Name   |   | Category/<br>Type |              | 262.50                               |
| Office Sought: House Disburse  | ment For:   | .,,,,             |              | ,                                    |
| Senate   | Primary General                                   |                   |              |                                      |
| President  | Other (specify) ▼                                 |                   |              |                                      |
| State: District:   |   |                   |              |                                      |
| Full Name (Last, First, Middle Initial)  |   |                   | Data of Dia  | huraamant                            |
| B. Jonathan Soltz  |   |                   | Date of Dis  |                                      |
| Mailing Address 5290 Duke Street   |   |                   | 03           | 13 2014                              |
| City   | State Zip Code                                    |                   | Transaction  | on ID : D587185                      |
| Alexandria Purpose of Disbursement   | VA 22304  |                   | _            |                                      |
| Strategic Management Services  |   |                   | Amount of E  | Each Disbursement this Period        |
| Candidate Name   |   | Category/<br>Type |              | 262.50                               |
| Office Sought: House Disburse  | ment For:   |                   |              |                                      |
| Senate   | Primary General                                   |                   |              |                                      |
| President State: District:   | Other (specify) ▼                                 |                   |              |                                      |
| Full Name (Last, First, Middle Initial)  |   |                   |              |                                      |
| C. Jonathan Soltz  |   |                   | Date of Dis  | bursement                            |
| Mallian Address Tool D. L. Co.   |   |                   | M M /        | D D / Y Y Y Y                        |
| Mailing Address 5290 Duke Street   |   |                   | 03           | 28 2014                              |
| City   | State Zip Code                                    |                   | Transaction  | on ID : D587186                      |
| Alexandria   | VA 22304  |                   | - Transactiv | 511 ID : D307 100                    |
| Purpose of Disbursement Strategic Management Services  |   |                   |              |                                      |
| Candidate Name   |   | Category/<br>Type | Amount of E  | Each Disbursement this Period 262.50 |
| Office Sought: House Disburse  | ement For:  | Type              |              |                                      |
| Senate   | Primary General                                   |                   |              |                                      |
| President  | Other (specify) ▼                                 |                   |              |                                      |
| State: District:   |   |                   |              |                                      |
| SUBTOTAL of Disbursements This Page (optional).  |   | ·····             |              | 787.50                               |
| TOTAL This Period (last page this line number only   | ·)  |                   |              | , , , , , , ,                        |

| S           | CHEDULE B (FEC Form 3X)   |                |                                      |     | FOR            | LINE      | NUMBE | R:     |                  |       | PAG       | iE 31    | OF    | 34     |
|-------------|---|----------------|--------------------------------------|-----|----------------|-----------|-------|--------|------------------|-------|-----------|----------|-------|--------|
| IT          | EMIZED DISBURSEMENTS  |                | arate schedule(s)<br>category of the | \ I | (chec          | k only    | one)  |        | <b>-</b> -       | _     |           |          |       |        |
|             |   |                | Summary Page                         |     | ×              | 21b<br>27 | 22    |        | 23               |       | 24<br>28c | 25       |       | 26     |
| _           |   | <u> </u>       |                                      |     |                |           | 28    |        | 28b              |       |           | 29       |       | 30b    |
|             | ny information copied from such Reports and Statem for commercial purposes, other than using the name |                |                                      |     |                |           |       |        |                  |       |           |          |       |        |
| $\setminus$ | NAME OF COMMITTEE (In Full)   |                |                                      |     |                |           |       |        |                  |       |           |          |       |        |
| $ \rangle$  | VOTEVETS  |                |                                      |     |                |           |       |        |                  |       |           |          |       |        |
|             | Full Name (Last, First, Middle Initial)   |                |                                      |     |                |           |       |        |                  |       |           |          |       |        |
| Α.          | Tim Tagaris   |                |                                      |     |                |           |       | of D   | isburs           | eme   |           | YY       | II Y  |        |
|             | Mailing Address 1735 P St NW  |                |                                      |     |                |           | 0     | _      |                  | 17    | ΙĹ        | 2014     |       |        |
|             | City  | State          | Zip Code                             |     |                |           | Tre   | nead   | tion II          | ٠ . D | 585909    |          |       |        |
|             | Washington  | DC             | 20036                                |     |                |           | 116   | IIISau | LIOII IL         | , . D | 2003908   | ,        |       |        |
|             | Purpose of Disbursement Digital Consulting Services   |                |                                      |     | -              |           | Amo   | unt o  | f Each           | Dis   | sbursem   | ent this | Peri  | iod    |
|             | Candidate Name  |                |                                      | C   | ategoi<br>Type | ry/       |       |        |                  |       |           | 73       | 32.32 |        |
|             | Office Sought: House Disbursen  | nent For:      |                                      |     | турс           |           |       |        | 7                |       | ,         |          |       |        |
|             | Senate  | Primary        | General                              |     |                |           |       |        |                  |       |           |          |       |        |
|             |   | Other (spec    | cify) 🔻                              |     |                |           |       |        |                  |       |           |          |       |        |
| _           | State: District:  |                |                                      |     |                |           |       |        |                  |       |           |          |       |        |
| Б           | Full Name (Last, First, Middle Initial)   |                |                                      |     |                |           | D - 4 | - ( D  | · - I- · · · · - |       | 4         |          |       |        |
| В.          | Tim Tagaris   |                |                                      |     |                |           |       |        | isburs           |       |           |          |       |        |
|             | Mailing Address 1735 P St NW  |                |                                      |     |                |           |       | 3      |                  | 14    | / Y       | 2014     | Y     |        |
|             | -   | State<br>DC    | Zip Code                             |     |                |           | Tra   | ınsac  | tion II          | ) : C | 585930    | )        |       |        |
|             | Washington Purpose of Disbursement  | DC             | 20036                                |     |                |           |       |        |                  |       |           |          |       |        |
|             | Digital Consulting Services   |                |                                      |     |                |           | Amo   | unt o  | f Each           | Dis   | sbursem   | ent this | Peri  | iod    |
|             | Candidate Name  |                |                                      | Ca  | ategoi<br>Type | ry/       |       |        | ,                |       | -,-       | 50       | 00.00 | ,      |
|             | Office Sought: House Disbursen  | nent For:      | I .                                  |     |                |           |       |        |                  |       |           |          |       |        |
|             |   | Primary        | General                              |     |                |           |       |        |                  |       |           |          |       |        |
|             | President State: District:  | Other (spec    | cify) 🔻                              |     |                |           |       |        |                  |       |           |          |       |        |
| _           | Full Name (Last, First, Middle Initial)   |                |                                      |     |                |           |       |        |                  |       |           |          |       |        |
| C.          | Tim Tagaris   |                |                                      |     |                |           | Date  | of D   | isburs           | eme   | ent       |          |       |        |
|             | Mailing Address 1735 P St NW  |                |                                      |     |                |           | 0     | _      |                  | 19    | / Y       | 2014     | Y     |        |
|             | City S  | State          | Zip Code                             |     |                |           |       |        |                  |       |           |          |       |        |
|             | Washington  | DC             | 20036                                |     |                |           | Tra   | ınsac  | tion II          | ) : C | 585923    | 3        |       |        |
|             | Purpose of Disbursement Digital Consulting Services   |                |                                      |     | -              |           |       |        |                  |       |           |          |       |        |
|             | Candidate Name  |                |                                      |     | ategoi<br>Type | ry/       | Amo   | unt o  | f Each           | Dis   | sbursem   | ent this | Peri  |        |
|             | Office Sought: House Disbursen  | nent For:      | l                                    |     |                |           |       |        | 7                |       | 7         |          |       |        |
|             |   | Primary        | General                              |     |                |           |       |        |                  |       |           |          |       |        |
|             |   | Other (spec    | cify) 🔻                              |     |                |           |       |        |                  |       |           |          |       |        |
| _           | State: District:  |                |                                      |     |                |           |       |        |                  |       |           |          |       |        |
| <br>  s     | SUBTOTAL of Disbursements This Page (optional)  | ************** |                                      |     |                |           |       | -      | -                |       | -         | 173      | 2.32  | $\Box$ |
| $\vdash$    |   |                |                                      |     |                |           | F     | =      | ,                |       | 7         | -        |       | =      |
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| SCHEDULE B (FEC Form 3X)   | 1100 00000 1 1 1 1 1                                     | FOR LINE          | NUMBER: PAGE 32 OF 34                   |
|--|--|-------------------|---|
| TEMIZED DISBURSEMENTS  | Use separate schedule( for each category of the          | (oneon only       | •                                       |
|  | Detailed Summary Page                                    |                   | 22 X 23 24 25 26 29 30                  |
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| NAME OF COMMITTEE (In Full) VOTEVETS   | ·  |                   |   |
| Full Name (Last, First, Middle Initial)  |  |                   |   |
| A. Gallego for Arizona   |  |                   | Date of Disbursement                    |
| Mailing Address PO BOX 1710  |  |                   | 03 07 2014                              |
| City<br>PHOENIX  | State Zip Code<br>AZ 85001                               |                   | Transaction ID : D585929                |
| Purpose of Disbursement Contribution   |  | · · · ·           | Amount of Each Disbursement this Period |
| Candidate Name RUBEN GALLEGO   |  | Category/<br>Type | 5000.00                                 |
| Senate X   | ment For: 2014 Primary General Other (specify)           |                   |   |
| State: AZ District: 07   |  |                   |   |
| Full Name (Last, First, Middle Initial)  MARK TAKAI FOR CONGRESS   |  |                   | Date of Disbursement                    |
| Mailing Address PO BOX 2267  |  |                   | 03 21 2014                              |
| Pearl City   | State Zip Code<br>HI 96782                               |                   | Transaction ID : D585927                |
| Purpose of Disbursement<br>Contribution  |  |                   | Amount of Each Disbursement this Period |
| Candidate Name  Mark Takai   |  | Category/<br>Type | 2500.00                                 |
| Office Sought: House Disburser   | ment For: 2014 Primary General Other (specify)           | 71-               |   |
| Full Name (Last, First, Middle Initial) - Tulsi for Hawaii   |  |                   | Date of Disbursement                    |
| Mailing Address PO Box 75561   |  |                   | 03 28 2014                              |
| City Kapolei Purpose of Disbursement   | State Zip Code<br>HI 96707                               |                   | Transaction ID: D585936                 |
|  |  |                   | Amount of Each Disbursement this Period |
| Contribution Candidate Name  |  |                   |   |
| Candidate Name Tulsi Gabbard   |  | Category/<br>Type | 2500.00                                 |
| Candidate Name Tulsi Gabbard   | ment For: 2014<br>Primary ∑ General<br>Other (specify) ▼ | Type              | 2500.00                                 |

| SCHEDULE B (FEC Form 3X)  | Hoo concrete sales dult (-)                       | FOR LINE NUMBER: PAGE 3 |                          |                        |
|---|---|-------------------------|--------------------------|------------------------|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s) for each category of the | (check only one)        |                          |                        |
|   | Detailed Summary Page                             | 21b<br>27               | 22 X 23 28b              | 24 25 26<br>28c 29 30  |
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| or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full) | e and address of any politic                      | cai committee to        | SOIICIT CONTRIBUTIONS IF | om such committee.     |
| VOTEVETS  |   |                         |                          |                        |
| Full Name (Last, First, Middle Initial)   |   |                         |                          |                        |
| A. WALSH FOR MONTANA  |   |                         | Date of Disburseme       |                        |
| Mailing Address PO BOX 1724   |   |                         | 02 / 06                  | 2014                   |
| ,   | State Zip Code                                    |                         | Transaction ID : I       | 7585017                |
| HELENA Purpose of Disbursement  | MT 59624  |                         | Transaction ib . I       | 5505511                |
| Contribution  |   |                         | Amount of Each Di        | sbursement this Period |
| Candidate Name  |   | Category/               |                          | 5000.00                |
| JOHN E E WALSH  |   | Type                    | 7                        | 3000.00                |
| Senate  | nent For: 2014  Primary General  Other (specify)  |                         |                          |                        |
| State: MT District:   | Care (openity)                                    |                         |                          |                        |
| Full Name (Last, First, Middle Initial)   |   |                         |                          |                        |
| 3.  |   |                         | Date of Disburseme       | ent                    |
| Mailing Address   |   |                         | M = M / D = D            | /                      |
| City  | State Zip Code                                    |                         |                          |                        |
| Purpose of Disbursement   |   |                         |                          |                        |
| Candidate Name  |   |                         | Amount of Each Di        | sbursement this Period |
| Canadate Name   |   | Category/<br>Type       |                          |                        |
| Office Sought: House Disbursem  | nent For:   | 71                      |                          |                        |
|   | Primary General                                   |                         |                          |                        |
| President State: District:  | Other (specify) ▼                                 |                         |                          |                        |
| Full Name (Last, First, Middle Initial)   |   |                         |                          |                        |
| C.  |   |                         | Date of Disburseme       | ent                    |
| Mailing Address   |   |                         | M M / D D                | /                      |
|   | State Zip Code                                    |                         |                          |                        |
|   | p 3000  |                         |                          |                        |
| Purpose of Disbursement   |   |                         |                          |                        |
| Candidate Name  |   | Category/<br>Type       | Amount of Each Di        | sbursement this Period |
| Office Sought: House Disbursem  | nent For:   | туре                    | 7                        | 7                      |
|   | Primary General                                   |                         |                          |                        |
|   | Other (specify) ▼                                 |                         |                          |                        |
| State: District:  |   |                         |                          |                        |
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| SUBTOTAL of Disbursements This Page (optional)                                    |   | ·····•                  |                          |                        |
| TOTAL This Period (last page this line number only).                              |   |                         |                          | 15000.00               |

| Use separate schedule(s) for each category of reach category of r  | HEDULE B (FEC Form 3X)                                |                       |           | = NUMBER: PAGE 34 OF 34                 |  |  |  |  |  |
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| Date of Disbursement   Disburseme    | · ·   |                       | -         | TO MIDELL.                              |  |  |  |  |  |
| ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of seliciting contributions from such committee.  NAME OF COMMITTEE (in Full)  VOTEVETS  Full Name (Last, First, Middle Initial)  FRIENDS OF CONNIE PILLICH  Mailing Address 2328 Easthill Ave  City State Zip Code  Office Sought: Persident Other (specify) ▼  Senate President Other (specify) ▼  Date of Disbursement this Period  Cardidate Name  Cardidate Name  Cardidate Name  Disbursement For:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Cardidate Name  Disbursement For:  Cardidate Name  Cardidate Name  Disbursement For:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Cardidate Name  Cardidate Name  Disbursement For:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Cardidate Name  Cardidate Name  Disbursement For:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Cardidate Name  | I LIVIIZED DISDUNSEIVIEN IS                           |                       | 1 ` ′     |   |  |  |  |  |  |
| NALE OF COMMITTEE (in Full)  VOTEVETS  Full Name (Last, First, Middle Initial)  FRIENDS OF CONNIE PILLICH  Mailing Address 2328 Easthill Ave  City State Zip Code Cindonant OH 45208  Furpose of Disbursement Nor-Federial Contribution  Candidate Name  City State Zip Code Other (specify) ▼  Date of Disbursement this Period  Cardidate Name  Category/  Type  Date of Disbursement this Period  Candidate Name  Category/ Type  Date of Disbursement this Period  Candidate Name  Category/ Type  Date of Disbursement this Period  Candidate Name  Category/ Type  Date of Disbursement this Period  Candidate Name  Category/ Type  Date of Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursemen  |   | Detailed Summary Page | 27        | 28a 28b 28c X 29 30                     |  |  |  |  |  |
| NAME OF COMMITTEE (in Full)  VOTEVETS  Full Name (Last, First, Middle Initial)  FRIENDS OF CONNIE PILLICH  Mailing Address 2328 Easthill Ave  City  City  State Zip Code OH 45208  Purpose of Disbursement Non-Foderal Contribution  Candidate Name  Category'  Full Name (Last, First, Middle Initial)  Mailing Address  City  State Zip Code  Purpose of Disbursement  Candidate Name  Category'  Type  District:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category'  Type  Date of Disbursement  Amount of Each Disbursement this Period  Category'  Type  Date of Disbursement this Period  Category'  Type   |   |                       |           |   |  |  |  |  |  |
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| Full Name (Last, First, Middle Initial)  FRIENDS OF CONNIE PILLICH  Mailing Address 2328 Easthill Ave  City State Zip Code OH 45208  Transaction ID : D585931  Amount of Each Disbursement this Period Category' Type  Date of Disbursement this Period Category' Type  Office Sought: House Senate Primary General Other (specity) Value of Disbursement To: Category' Type  Office Sought: House Senate Primary General Other (specity) Value of Disbursement To: Category' Type  Office Sought: House Senate Primary General Other (specity) Value of Disbursement To: Category' Type  Office Sought: House Senate Primary General Other (specity) Value of Disbursement To: Category' Type  Office Sought: House Senate Primary General Other (specity) Value of Disbursement To: Category' Type  Office Sought: House Senate Primary General Other (specity) Value of Disbursement To: State: District:  Full Name (Last, First, Middle Initial)  Date of Disbursement  Amount of Each Disbursement this Period Category' Type  Office Sought: House Senate Primary General Other (specity) Value Other (specity) | ` '   |                       |           |   |  |  |  |  |  |
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| ## Disbursement    Date of Disbursement  | Full Name (Last First Middle Initial)                 |                       | İ         |   |  |  |  |  |  |
| Mailing Address 2328 Easthill Ave  City City City City City City City Cit  |   |                       |           | Date of Disbursement                    |  |  |  |  |  |
| City State Zip Code Cincinnati OH 45208  Furpose of Disbursement Non-Federal Contribution Candidate Name  Category/ Type  Category/ Senate Primary General Primary General Other (specify)   Date of Disbursement  Mailing Address  City State Zip Code  Purpose of Disbursement Candidate Name  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  his Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursemen | TRIENDO OF COMMETTELION                               |                       |           | M M / D D / Y Y Y Y                     |  |  |  |  |  |
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| Non-Federal Contribution  Candidate Name  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Category/ Type  Category/ Type  Office Sought: House Senate President President Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Date of Disbursement  Category/ Type  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Category/ Type  Date of Disbursement this Period  Category/ Type  Category/ Type  Date of Disbursement this Period  Category/ Type  Category/ Type  Date of Disbursement  Category/ Type  Office Sought: House Primary General Primar  | Purpose of Disbursement                               | 40200                 |           |   |  |  |  |  |  |
| Office Sought: House Sonate President State: District: Other (specify) State Zip Code  Purpose of Disbursement  State: District: District: Other (specify) Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Disbursement District: Other (specify) Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Disbursement Disbursement this Period  Date of Disbursement this Period  Category/ Type  Disbursement Disbursement this Period  Disbursement Disbursement For: Sonate Primary General Primary General Disbursement District: District | Non-Federal Contribution                              |                       |           | Amount of Each Disbursement this Period |  |  |  |  |  |
| Office Sought:   | Candidate Name  |                       | Category/ | 2522.22                                 |  |  |  |  |  |
| Senate President Other (specify)   State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate President Other (specify)   State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Disbursement For: General Other (specify)   Senate Primary General Other (specify)   Type  Office Sought: House Senate Primary General Other (specify)   Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify)   Office Sought: Primary General Other (specify)   Other (specify)   Amount of Each Disbursement this Period   Category/ Type   |   |                       |           | 2500.00                                 |  |  |  |  |  |
| State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Primary General Other (specify)  Category/ Type  Office Sought: Amount of Each Disbursement  Candidate Name (Last, First, Middle Initial)  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursem |   |                       |           |   |  |  |  |  |  |
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| Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Primary General President District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Date of Disbursement this Period  Date of Disbursement this Period  Amount of Each Disbursement  Category/ Type  Office Sought: House Disbursement  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate President Other (specify)   Office Sought: House Disbursement For: Senate Primary General Other (specify)   Substortal of Disbursements This Page (optional)   |   | Omer (specify)        |           |   |  |  |  |  |  |
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| Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House President Primary General Other (specify) ▼  Date of Disbursement  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Amount of Each Disbursement this Period  Amount of Each Disbursement  Date of Disbursement  Amount of Each Disbursement  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Senate Primary General Other (specify) ▼  State: District:  Substrotal of Disbursements This Page (optional)  | Mailing Address                                       |                       |           |   |  |  |  |  |  |
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| Date of Disbursement  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General President Other (specify)  State: District:  Substitute Substitute State Substitute State S |   | (opening) ▼           |           |   |  |  |  |  |  |
| Date of Disbursement  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General President Other (specify)  State: District:  Substitute Substitute State Substitute State S | Full Name (Last, First, Middle Initial)               |                       |           |   |  |  |  |  |  |
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| Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  President State: District:  Substotal of Disbursements This Page (optional)  2500.00   | Mailing Address                                       |                       |           |   |  |  |  |  |  |
| Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  President State: District:  Substotal of Disbursements This Page (optional)  2500.00   | City  | State Zin Code        |           |   |  |  |  |  |  |
| Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify)  State: District:  Substoctal of Disbursements This Page (optional)  | Only  | nate Zip Oude         |           |   |  |  |  |  |  |
| Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Substruct: Disbursements This Page (optional)   | Purpose of Disbursement                               |                       |           |   |  |  |  |  |  |
| Office Sought: House Disbursement For: Senate Primary General Other (specify)  State: District:  Substruct: Disbursements This Page (optional)   |   |                       |           | Amount of Each Disbursement this Period |  |  |  |  |  |
| Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼  State: District:  Subtrotal of Disbursements This Page (optional)   | Candidate Name  |                       |           |   |  |  |  |  |  |
| State: District: Primary General Other (specify)   State: District:   SUBTOTAL of Disbursements This Page (optional)   | Office Sought: House                                  | pont For:             | Туре      |   |  |  |  |  |  |
| State: District: Other (specify)   SUBTOTAL of Disbursements This Page (optional)  |   |                       |           |   |  |  |  |  |  |
| State: District:  SUBTOTAL of Disbursements This Page (optional)   |   |                       |           |   |  |  |  |  |  |
| SOBTOTAL OF DISDUISEMENTS This rage (optional)   |   | VI - 37 ▼             |           |   |  |  |  |  |  |
| SOBTOTAL OF DISDUISEMENTS This rage (optional)   |   |                       |           |   |  |  |  |  |  |
|  | SUBTOTAL of Disbursements This Page (optional)        |                       |           | 2500.00                                 |  |  |  |  |  |
|  |   |                       |           | 2500.00                                 |  |  |  |  |  |